| Fill in this information to identify your case: |   |                                      |
|---|---|--------------------------------------|
| United States Bankruptcy Court for the :        |   |                                      |
| NORTHERN District ofILLINOIS(State)             |   |                                      |
| Case Number (If known):                         | Chapter you are filing under:  Chapter 7 Chapter 11 Chapter 12 Chapter 13 | ☐ Check if this is an amended filing |

## Official Form 101

### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together-called a joint case-and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: Identify Yourself  |                            |   |
|----|--|----------------------------|---|
|    |  | About Debtor 1:            | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name   |                            |   |
|    | Write the name that is on your government-issued picture identification (for example, your driver's license or | Lynne First name           | First name                                    |
|    | passport).   | Middle name                | Middle name                                   |
|    | Bring your picture   | Fotias                     |   |
|    | identification to your meeting with the trustee.   | Last name                  | Last name                                     |
|    |  | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III)                    |
| 2. | All other names you  |                            |   |
|    | have used in the last 8 years  | First name                 | First name                                    |
|    | Include your married or maiden names.  | Middle name                | Middle name                                   |
|    |  | Last name                  | Last name                                     |
|    |  | First name                 | First name                                    |
|    |  | Middle name                | Middle name                                   |
|    |  | Last name                  | Last name                                     |
| 3. | Only the last 4 digits of your Social Security   | xxx - xx - <u>4992</u>     | XXX - XX                                      |
|    | number or federal<br>Individual Taxpayer<br>Identification number  | OR                         | OR  |
|    |  | 9xx - xx                   | 9xx - xx                                      |

Case 17-25554

Filed 08/25/17 Doc 1

Entered 08/25/17 16:33:42 Desc Main Page 2 of 56

Document Fotias Lynne Debtor 1 Case Number (if known) \_ Last Name Middle Name

|   | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):   |
|---|---|---|
| Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years  Include trade names and doing business as names | Business name  Business name  EIN  EIN  | I have not used any business names or EINs.  Business name  Business name  EIN  EIN   |
| 5. Where you live   | 850 Village Center Dr Number Street   | If Debtor 2 lives at a different address:  Number Street  |
|   | Unit 221  Indian Head Park IL 60525 City State ZIP Code  COOK County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | City State ZIP Code  County  If Debtor 2's mailing address is different from the one above, fill it in here. Note that the court will send any notices this mailing address.            |
|   | Number Street  P.O. Box  City State ZIP Code  | Number Street  P.O. Box  City State ZIP Code  |
| 6. Why you are choosing this district to file for bankruptcy.   | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  have another reason. Explain. (See 28 U.S.C. § 1408                                     | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408 |

Case 17-25554 Filed 08/25/17 Doc 1

Entered 08/25/17 16:33:42 Desc Main Document Fotias Page 3 of 56 Lynne Case Number (if known) \_

| Pa  | Tell the Court About You   | r Bankruptcy  | Case                                      |   |              |  |              |
|-----|--|---|---|---|--------------|--|--------------|
| 7.  | The chapter of the<br>Bankruptcy Code you  |   |   | • |              | equired by 11 U.S.C. § 342(b) for lipage 1 and check the appropriate b |              |
|     | are choosing to file<br>under  | ☐ Chapter 7 ☐ Chapter 11  |   |   |              |  |              |
|     | under  |   |   |   |              |  |              |
|     |  | ☐ Chap  |   |   |              |  |              |
|     |  | ■ Chapter 13  |   |   |              |  |              |
| 8.  | How you will pay the fee   | <ul> <li>I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.</li> <li>☐ I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).</li> <li>I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the</li> </ul> |   |   |              |  |              |
| 9.  | Have you filed for bankruptcy within the last 8 years?   | □ No ■ Yes.   | District NDIL                             |   | When         | 12/15/2015 Case Number   | 15-42152     |
|     |  |   | District None                             |   | When         |  |              |
|     |  |   |   |   |              | MM / DD / YYYY   |              |
|     |  |   | District                                  |   | When         | Case Number<br>MM / DD / YYYY  |              |
| 10. | Are any bankruptcy   | ■ No  |   |   |              |  |              |
|     | cases pending or being filed by a spouse who is not filing this case with you, or by a business parter, or by affiliate?             | ☐ Yes.  |   |   |              | Relationship to you Case Number, if known MM / DD / YYYY               | own          |
|     |  |   |   |   |              | Relationship to you Case Number, if known MM / DD / YYYY               |              |
| 11. | Do you rent your residence?  | □ No.<br>■ Yes.   | Go to line 12 Has your landlor residence? |   | ction judgme | ent against you and do you want to                                     | stay in your |
|     | Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it with this bankruptcy petition. |   |   |   |              |  |              |

Debtor 1

Case 17-25554 Doc 1 Filed 08/25/17 Entered 08/25/17 16:33:42 Desc Main

| Debtor 1 | Lynne      |             | Document<br>Fotias | Page 4 of 56  Case Number (if known) |
|----------|------------|-------------|--------------------|--------------------------------------|
|          | First Name | Middle Name | Last Name          |                                      |

|     | Report About Any Busine   | esses You Ow    | n as a Sole Proprietor                  |                                      |  |
|-----|---|-----------------|---|--------------------------------------|--|
| 12. | Are you a sole proprietor of any full- or part-time business?   | ■ No.<br>□ Yes. | Go to Part 4.<br>Name and location of b | business                             |  |
|     | A sole proprietorship is a<br>business you operate as an<br>individual, and is not a<br>separate legal entity such as                       |                 | Name of business, if any                |                                      |  |
|     | a corporation, partnerhsip, or LLC.  If you have more than one sole proprietorship, use a separate sheed and attach it                      |                 | Number Street                           |                                      |  |
|     | to this petition.   |                 | City                                    |                                      | State Zip Code   |
|     |   |                 | Check the appropriate                   | box to describe your business:       |  |
|     |   |                 | ☐ Health Care Busi                      | iness (as defined in 11 U.S.C. § 10  | 1(27A))  |
|     |   |                 | ☐ Single Asset Rea                      | al Estate (as defined in 11 U.S.C. § | 101(51B))  |
|     |   |                 | ☐ Stockbroker (as o                     | defined in 11 U.S.C. § 101(53A))     |  |
|     |   |                 | ☐ Commodity Broke                       | er (as defined in 11 U.S.C. § 101(6  | ))   |
|     |   |                 | ☐ None of the abov                      | /e                                   |  |
|     | For a definition of <i>small business debtor</i> , see 11 U.S.C. § 101(51D).  | □ No. I         | the Bankruptcy Code.                    | 11, but I am NOT a small busines:    | s debtor according to the definition in tor according to the definition in the |
| Pa  | Report if You Own or Have   | ve Any Hazard   | lous Property or Any Prop               | perty That Needs Immediate Attenti   | on   |
| 14. | Do you own or have any<br>property that poses or is<br>alleged to pose a threat   | No.             | What is the hazard?                     |                                      |  |
|     | of imminent and indentifiable hazard to public health or safety? Or do you own any  |                 |   |                                      |  |
|     | property that needs<br>immediate attention?<br>For example, do you own<br>perishable goods, or livestock<br>that must be fed, or a building |                 | If immediate attention is               | needed, why is it needed?            |  |
|     | that needs urgent repairs?  |                 | Where is the property?                  |                                      |  |
|     |   |                 | which is the property:                  | Number Street                        |  |
|     |   |                 | , .                                     |                                      |  |
|     |   |                 |   |                                      |  |

Case 17-25554 Doc 1 Filed 08/25/17 Document Fotias

Entered 08/25/17 16:33:42 Page 5 of 56

Desc Main

Debtor 1

Lynne

Case Number (if known)

Part 5:

Explain Your Efforts to I

Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

| Receive a Briefing About Credit Counseling  |   |
|---|---|
| About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):   |
| You must check one:   | You must check one:   |
| I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.  | ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.  |
| Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.  | Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.  |
| I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.   | ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.   |
| Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.   | Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.   |
| I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.   | I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.   |
| To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.  | To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.  |
| Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.  Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. | Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.  Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. |
| I am not required to receive a briefing about credit counseling because of:   | ☐I am not required to receive a briefing about credit counseling because of:  |
| Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.  | Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.  |
| Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or  | Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or  |

through the internet, even after I

duty in a military combat zone.

reasonably tried to do so.

Active duty. I am currently on active military

If you believe you are not required to receive a

briefing about credit counseling, you must file a

motion for waiver of credit counseling with the court.

through the internet, even after I

duty in a military combat zone.

reasonably tried to do so.

Active duty. I am currently on active military

If you believe you are not required to receive a

briefing about credit counseling, you must file a

motion for waiver of credit counseling with the court.

Case 17-25554 Doc 1

Filed 08/25/17 Document Fotias

Entered 08/25/17 16:33:42 Desc Main Page 6 of 56

Debtor 1

Lynne

Case Number (if known)

| Pa  | rt 6: Answer These Questions   | for Reporting Purposes   |  |  |
|-----|--|--|--|--|
| 16. | What kind of debts do you have?  Are you filing under Chapter 7?  Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be | as "incurred by an individual  No. Go to line 16b. Yes. Go to line 17.  16b. Are your debts primarily money for a business or invention of the second of the | r consumer debts? Consumer debts are of primarily for a personal, family, or household by business debts? Business debts are debts estment or through the operation of the business owe that are not consumer debts or business mapter 7. Go to line 18.  There 7. Do you estimate that after any exempt are paid that funds will be available to dist | d purpose."  ots that you incurred to obtain less or investment.  debts.   |
|     | available for distribution to unsecured creditors?   |  |  |  |
| 18. | How many creditors do you estimate that you owe?   | ■ 1-49<br>□ 50-99<br>□ 100-199<br>□ 200-999  | ☐ 1,000-5,000<br>☐ 5,001-10,000<br>☐ 10,001-25,000   | ☐ 25,001-50,000<br>☐ 50,001-100,000<br>☐ More than 100,000   |
| 19. | How much do you estimate your assets to be worth?  | ■ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million  | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million  | □\$500,000,001-\$1 billion □\$1,000,000,001-\$10 billion □\$10,000,000,001-\$50 billion □More than \$50 billion                          |
| 20. | How much do you<br>estimate your liabilities<br>to be?   | ■ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million  | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million  | □\$500,000,001-\$1 billion □\$1,000,000,001-\$10 billion □\$10,000,000,001-\$50 billion □More than \$50 billion                          |
| Pa  | rt 7: Sign Below   |  |  |  |
| For | you  | correct.  If I have chosen to file under Chap of title 11, United States Code. I u under Chapter 7.  If no attorney represents me and I this document, I have obtained an I request relief in accordance with I understand making a false stater   | <b>x</b>   | ole, under Chapter 7, 11,12, or 13 apter, and I choose to proceed not an attorney to help me fill out 2(b).  specified in this petition. |
|     |  | Executed on  |  | cuted on   |

Case 17-25554 Doc 1 Filed 08/25/17 Entered 08/25/17 16:33:42 Desc Main Document Page 7 of 56

| Debtor 1 | Lynne      | D(          | Fotias    | Case Number (if known) |
|----------|------------|-------------|-----------|------------------------|
|          | Firet Name | Middle Name | Last Name |                        |

For your attorney, if you are represented by one

if you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| 🗶 /s/ Ricardo Gomez              | Date        | Da | te: 08/24/       | 2017            |
|----------------------------------|-------------|----|------------------|-----------------|
| Signature of Attorney for Debtor | Duic        | MM | / DD / YYY       | Υ               |
| Ricardo Gomez                    |             |    |                  |                 |
| Printed name                     |             |    |                  | _               |
| Geraci Law L.L.C.                |             |    |                  |                 |
| Firm name                        |             |    |                  | _               |
| 55 E. Monroe St., #3400          |             |    |                  |                 |
| •                                |             |    |                  |                 |
| Number Street                    |             |    |                  | _               |
|                                  |             |    |                  | _               |
|                                  | IL          | 6  | 0603             | _               |
| Number Street                    | IL<br>State | 6  | 0603<br>ZIP Code | _               |
| Number Street Chicago            | State       |    | ZIP Code         | racilaw.com     |
| Number Street  Chicago  City     | State       |    | ZIP Code         | <br>racilaw.com |

| Fill in this in           | formation to ider   | ntify your case:                     |                  |
|---------------------------|---------------------|--------------------------------------|------------------|
| Debtor 1                  | Lynne               |                                      | Fotias           |
|                           | First Name          | Middle Name                          | Last Name        |
| Debtor 2                  |                     |                                      |                  |
| (Spouse, if filing)       | First Name          | Middle Name                          | Last Name        |
| United States             | Bankruptcy Court fo | or the : <u>NORTHERN</u> District of | ILLINOIS (State) |
| Case Number<br>(If known) | Г                   |                                      | _                |

## Official Form 106Sum

#### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Summarize Your Assets  |  |
|--|--|
|  | <b>Your assets</b> Value of what you own |
| Schedule A/B: Property (Official Form 106A/B)     1a. Copy line 55, Total real estate, from Schedule A/B   | \$0                                      |
| 1b. Copy line 62, Total personal property, from Schedule A/B   | \$ 7,525                                 |
| 1c. Copy line 63, Total of all property on Schedule A/B  | \$ 7,525                                 |
|  |  |
| Summarize Your Liabilities   |  |
|  | Your liabilities<br>Amount you owe       |
| <ol> <li>Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)</li> <li>Copy the total you listed in Column A, Amount of claim, at the bottom of the last page</li> </ol> | e of Part 1 of Schedule D                |
| <ol> <li>Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)</li> <li>Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedul</li> </ol>        | \$13,822                                 |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Sche  | dule E/F                                 |
|  |  |
| Part 3: Summarize Your Liabilities   |  |
| Schedule I: Your Income (Official Form 106I)     Copy your combined monthly income from line 12 of Schedule I  | \$2,044.38                               |
| Schedule J: Your Expenses (Official Form 106J)     Copy your monthly expenses from line 22c of Schedule J  | \$1,840.00                               |
|  |  |

Case 17-25554 Doc 1 Filed 08/25/17 Entered 08/25/17 16:33:42 Desc Main Page 9 of 56

Document Lynne Case Number (if known) \_\_\_ Debtor 1 First Name Middle Name Last Name

| Part 4: Answer These Questions for Administrative and Statistical Records   |             |  |  |  |  |  |
|---|-------------|--|--|--|--|--|
| 6. Are you filing for bankruptcy under Chapter 7, 11 or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.             |             |  |  |  |  |  |
| Yes   |             |  |  |  |  |  |
| 7. What kind of debt do you have?   |             |  |  |  |  |  |
| Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual printed family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S. | •           |  |  |  |  |  |
| Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.                                 |             |  |  |  |  |  |
| 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. \$1,839.48                    |             |  |  |  |  |  |
|   |             |  |  |  |  |  |
| 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:   |             |  |  |  |  |  |
|   | Total claim |  |  |  |  |  |
| From Part 4 of Schedule E/F, copy the following:  |             |  |  |  |  |  |
| 9a. Domestic support obligations (Copy line 6a.)  | \$_0.00     |  |  |  |  |  |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)   | \$_0.00     |  |  |  |  |  |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)   | \$_0.00     |  |  |  |  |  |
| 9d. Student loans. (Copy line 6f.)  | \$_0.00     |  |  |  |  |  |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)  | \$_0.00     |  |  |  |  |  |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)  | \$_0.00     |  |  |  |  |  |
| 9g. <b>Total.</b> Add lines 9a through 9f.  | \$_0.00     |  |  |  |  |  |

|  | Caso 1  | 7 25554 Doc 1  | Filad 09/25/17   | Entered 08/25/17 1              | 6:33:42 Des                                  | sc Main   |
|--|---|--|--|---------------------------------|--|---|
| Fill in this in  | formation to ide  | ntify your case and this filin   | ng:  | 0 of 56                         |  |   |
| Debtor 1   | Lynne   |  | Fotias   |                                 |  |   |
|  | First Name  | Middle Name  | Last Name  |                                 |  |   |
| Debtor 2<br>(Spouse, if filing)  | First Name  | Middle Name  | Last Name  |                                 |  |   |
| United States  | Bankruptcy Court for  | or the : <u>NORTHERN</u> Distric   | ct of <u>ILLINOIS</u>  |                                 |  |   |
| Case Number  | , ,   | <u> </u>   | (State)  |                                 | [  | Check if this is an   |
| (If known)   |   |  | <del></del>  |                                 |  | amended filing  |
| Official F   | orm 106A  | <u>/B</u>  |  |                                 |  |   |
| Schedul  | e A/B: Pr   | operty   |  |                                 |  | 12/15   |
| ategory where<br>esponsible for<br>ages, write you                               | you think it fits<br>supplying corre<br>ur name and cas<br>Describe Each Re   | best. Be as complete and a<br>ct information. If more spac<br>e number (if known). Answ<br>sidence, Building, Land, or O | ccurate as possible. If two mai  |                                 | both are equally                             |   |
| Yes.   | Describe  |  |  |                                 |  |   |
|  |   | -  | our entries fro Part 1, including  |                                 |  |   |
| you have at  | tached for Part 1   | . Write that number here .   |  |                                 | <b>&gt;</b>                                  | \$0.00  |
| Part 2:  | Describe Your Vel   | nicles   |  |                                 |  |   |
| O3. Cars, vans  No. Yes.  No. Yes.  No.  Zer  O4. Watercraft  Examples: No. Yes. | Describe  Describe  Make:  Model:  Year:  Approximate Milea  Other information:  2005 Buick LaCro  miles.  t, aircraft, motor  Boats, trailers, motor  Describe | Buick LaCrosse 2005 age: 140,000  bosse with over 140,000  chomes, ATVs and other recors, personal watercraft, fishing   | Who has an interest in the p Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a Check if this is communinstructions)  Creational vehicles, other vehicles, snowmobiles, motorcycle accepta | and another  nity property (see | Do not deduct secured the amount of any secu | claims or exemptions. Put red claims on Schedule D: aims Secured by Property  Current value of the portion you own?  00 \$ 3,000.00 |
|  | -   | -  | our entries fro Part 2, including  | · · ·                           |  | \$ 3,000.00   |
|  |   | sonal and Household Items  |  |                                 |  |   |
| raitu  |   | or equitable interest in any   | of the following items?  |                                 |  | Current value of the portion you own? Do not deduct secured claims or exemptions  |
|  | d goods and furn<br>Major appliances, f<br>Describe   | urniture, linens, china, kitchenwa   |  |                                 |  |   |
|  |   | Furniture, linens, small applian   | ces, table & chairs, bedroom set   |                                 | \$300  | \$ 300.00   |

Official Form 106A/B Record # 748167 Schedule A/B: Property Page 1 of 6

Debtor 1 Lynne Case 17-25554 Doc 1 Filed 08/25/17 Entered 08/25/17 16:33:42 Desc Main Page 11 of 56 December (if known)

O7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music

| 07.            | 7. Electronics  |   |  |  |  |  |  |
|----------------|---|---|--|--|--|--|--|
|                | Examples:   | Televisions and ra  | dios; audio, video, stereo, and digital equipment; computers, printers, scanners; music  |  |  |  |  |
|                | collections;  | electronic devices  | including cell phones, cameras, media players, games   |  |  |  |  |
|                | No.   |   |  |  |  |  |  |
|                | Yes.  | Describe  |  |  |  |  |  |
|                |   |   | Flat screen TV, computer, printer, music collection, cell phone \$100  |  |  |  |  |
|                |   |   |  | \$ 100.00  |  |  |  |
| 08.            | Collectible   | s of value  |  |  |  |  |  |
| ***            |   |   | nes; paintings, prints, or other artwork; books, pictures, or other art objects;   |  |  |  |  |
|                |   |   | collections; other collections, memorabilia, collectibles  |  |  |  |  |
|                | No.   |   |  |  |  |  |  |
|                | <b>=</b>  | December  |  |  |  |  |  |
|                | Yes.  | Describe  |  | 2 0 00   |  |  |  |
| l              |   |   |  | \$0.00   |  |  |  |
| 09.            |   | for sports and  |  |  |  |  |  |
|                |   |   | nic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes  |  |  |  |  |
|                |   | ; carpentry tools; r  | nusical instruments  |  |  |  |  |
|                | No.   |   |  |  |  |  |  |
|                | Yes.  | Describe  |  |  |  |  |  |
|                | <del></del>   |   |  | \$ 0.00  |  |  |  |
| 10.            | Firearms  |   |  |  |  |  |  |
|                |   | Pistols, rifles, shot   | guns, ammunition, and related equipment  |  |  |  |  |
|                | No.   |   |  |  |  |  |  |
|                | =   |   |  |  |  |  |  |
|                | Yes.  | Describe  |  |  |  |  |  |
|                |   |   |  | \$0.00   |  |  |  |
| 11.            | Clothes   |   |  |  |  |  |  |
|                | Examples: I   | Everyday clothes,   | furs, leather coats, designer wear, shoes, accessories   |  |  |  |  |
|                | No.   |   |  |  |  |  |  |
|                | Yes.  | Describe  |  |  |  |  |  |
|                | . 00.   | D0001100  | Clothes \$300  |  |  |  |  |
|                |   |   | - Sisterial Control of the Control o | \$ 300.00  |  |  |  |
| 12             | Jewelry   |   |  | <u> </u>   |  |  |  |
| 12.            | _   | Tuenday ieweln  | postumo involtu, apagamant ringo waddina ringo haidaam involtu, watabaa gama   |  |  |  |  |
|                | Examples.   | Everyday jeweliy,   | costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,   |  |  |  |  |
|                | gold cilver   |   |  |  |  |  |  |
|                | gold, silver  |   |  |  |  |  |  |
|                | gold, silver  |   |  | _  |  |  |  |
|                |   | Describe  |  |  |  |  |  |
|                | No.   | Describe  | Jewelry \$100  |  |  |  |  |
|                | No.   | Describe  | Jewelry \$100  | \$ <u>100.0</u> 0  |  |  |  |
| 13.            | No.   |   | Jewelry \$100  |  |  |  |  |
| 13.            | No. Yes.  |   |  |  |  |  |  |
| 13.            | No. Yes.  | nimals  |  |  |  |  |  |
| 13.            | No. Yes.  Non-farm a  Examples: I   | i <b>nimals</b><br>Dogs, cats, birds, l   |  |  |  |  |  |
| 13.            | No. Yes.  Non-farm a  Examples: I   | nimals  |  | \$ 100.00  |  |  |  |
|                | No. Yes.  Non-farm a  Examples: I No. Yes.  | i <b>nimals</b><br>Dogs, cats, birds, l<br>Describe   | norses   |  |  |  |  |
|                | No.  Non-farm a  Examples: I  No.  Yes.   | i <b>nimals</b><br>Dogs, cats, birds, l<br>Describe   |  | \$ 100.00  |  |  |  |
|                | No. Yes.  Non-farm a  Examples: I No. Yes.  | i <b>nimals</b><br>Dogs, cats, birds, l<br>Describe   | norses   | \$ 100.00  |  |  |  |
|                | No.  Non-farm a  Examples: I  No.  Yes.   | i <b>nimals</b><br>Dogs, cats, birds, l<br>Describe   | norses   | \$ 100.00  |  |  |  |
|                | No. Yes.  Non-farm a Examples: I No. Yes.  Any other I No.  | nimals Dogs, cats, birds, l Describe Describe and he  | norses   | \$ <u>100.0</u> 0  |  |  |  |
|                | No. Yes.  Non-farm a Examples: I No. Yes.  Any other I No.  | nimals Dogs, cats, birds, l Describe Describe and he  | ousehold items you did not already list, including any health aids you did not list  | \$ <u>100.0</u> 0  |  |  |  |
| 14.            | No. Yes.  Non-farm a Examples: I No. Yes.  Any other p No. Yes.   | Describe  | books, CDs, DVDs & Family Photos   | \$ 100.00<br>\$ 0.00<br>\$ 300.00  |  |  |  |
| <b>14.</b> 15. | No. Yes.  Non-farm a Examples: I No. Yes.  Any other p No. Yes.   | Describe Describe   | books, CDs, DVDs & Family Photos  of your entries from Part 3, including any entries for pages you have attached   | \$ 100.00<br>\$ 0.00   |  |  |  |
| <b>14.</b> 15. | No. Yes.  Non-farm a Examples: I No. Yes.  Any other p No. Yes.   | Describe Describe   | books, CDs, DVDs & Family Photos   | \$ 100.00<br>\$ 0.00<br>\$ 300.00  |  |  |  |
| <b>14.</b> 15. | No. Yes.  Non-farm a Examples: I No. Yes.  Any other p No. Yes.  Add the do for Part 3.                                   | Describe  Describe  Describe  Describe  | books, CDs, DVDs & Family Photos  of your entries from Part 3, including any entries for pages you have attached  ere here   | \$ 100.00<br>\$ 0.00<br>\$ 300.00  |  |  |  |
| <b>14.</b> 15. | No. Yes.  Non-farm a Examples: I No. Yes.  Any other p No. Yes.  Add the do for Part 3.                                   | Describe Describe   | books, CDs, DVDs & Family Photos  of your entries from Part 3, including any entries for pages you have attached  ere here   | \$ 100.00<br>\$ 0.00<br>\$ 300.00  |  |  |  |
| 14.            | No. Yes.  Non-farm a Examples: I No. Yes.  Any other p No. Yes.  Add the do for Part 3. No.                               | Describe Describe Describe Describe   | books, CDs, DVDs & Family Photos  of your entries from Part 3, including any entries for pages you have attached  ere here   | \$ 100.00<br>\$ 0.00<br>\$ 300.00<br>\$1,100.00  |  |  |  |
| 14.            | No. Yes.  Non-farm a Examples: I No. Yes.  Any other p No. Yes.  Add the do for Part 3. No.                               | Describe Describe Describe Describe   | books, CDs, DVDs & Family Photos  of your entries from Part 3, including any entries for pages you have attached  ere here   | \$ 100.00<br>\$ 0.00<br>\$ 300.00  |  |  |  |
| 14.            | No. Yes.  Non-farm a Examples: I No. Yes.  Any other p No. Yes.  Add the do for Part 3. No.                               | Describe Describe Describe Describe   | books, CDs, DVDs & Family Photos  of your entries from Part 3, including any entries for pages you have attached  ere here   | \$ 100.00  \$ 0.00  \$ 300.00  \$1,100.00  Current value of the portion you own?                                   |  |  |  |
| 14.            | No. Yes.  Non-farm a Examples: I No. Yes.  Any other p No. Yes.  Add the do for Part 3. No.                               | Describe Describe Describe Describe   | books, CDs, DVDs & Family Photos  of your entries from Part 3, including any entries for pages you have attached  ere here   | \$ 100.00  \$ 0.00  \$ 300.00  \$ 1,100.00  Current value of the portion you own? Do not deduct secured claims     |  |  |  |
| 14.            | No. Yes.  Non-farm a Examples: I No. Yes.  Any other p No. Yes.  Add the do for Part 3. No.                               | Describe Describe Describe Describe   | books, CDs, DVDs & Family Photos  of your entries from Part 3, including any entries for pages you have attached  ere here   | \$ 100.00  \$ 0.00  \$ 300.00  \$ 1,100.00  Current value of the portion you own?                                  |  |  |  |
| 14.            | No. Yes.  Non-farm a Examples: I No. Yes.  Any other p No. Yes.  Add the do for Part 3. No.                               | Describe Describe Describe Describe   | books, CDs, DVDs & Family Photos  of your entries from Part 3, including any entries for pages you have attached  ere here   | \$ 100.00  \$ 0.00  \$ 300.00  \$ 1,100.00  Current value of the portion you own? Do not deduct secured claims     |  |  |  |
| 14.            | No. Yes.  Non-farm a Examples: I No. Yes.  Any other p No. Yes.  Add the doofor Part 3. V You own or                      | Describe Describe Describe Describe and he desc | books, CDs, DVDs & Family Photos  of your entries from Part 3, including any entries for pages you have attached  ere here   | \$ 100.00  \$ 0.00  \$ 300.00  \$ 1,100.00  Current value of the portion you own? Do not deduct secured claims     |  |  |  |
| 14.            | No. Yes.  Non-farm a Examples: I No. Yes.  Any other p No. Yes.  Add the doo for Part 3. V  you own or  Cash Examples: I  | Describe Describe Describe Describe and he desc | busehold items you did not already list, including any health aids you did not list  books, CDs, DVDs & Family Photos  of your entries from Part 3, including any entries for pages you have attached her here   | \$ 100.00  \$ 0.00  \$ 300.00  \$ 1,100.00  Current value of the portion you own? Do not deduct secured claims     |  |  |  |
| 14.            | No. Yes.  Non-farm a Examples: I No. Yes.  Any other I No. Yes.  Add the do for Part 3. No.  you own or  Cash Examples: I | Describe Describe Describe Describe Describe Undervalue of all Write that numble describe Your Fire have any legal  | busehold items you did not already list, including any health aids you did not list  books, CDs, DVDs & Family Photos  of your entries from Part 3, including any entries for pages you have attached her here   | \$ 100.00  \$ 0.00  \$ 300.00  \$ 1,100.00  Current value of the portion you own? Do not deduct secured claims     |  |  |  |
| 14.            | No. Yes.  Non-farm a Examples: I No. Yes.  Any other p No. Yes.  Add the doo for Part 3. V  you own or  Cash Examples: I  | Describe Describe Describe Describe and he desc | busehold items you did not already list, including any health aids you did not list  books, CDs, DVDs & Family Photos  of your entries from Part 3, including any entries for pages you have attached her here   | \$ 0.00  \$ 300.00  \$ 1,100.00  Current value of the portion you own?  Do not deduct secured claims or exemptions |  |  |  |
| 14.            | No. Yes.  Non-farm a Examples: I No. Yes.  Any other I No. Yes.  Add the do for Part 3. No.  you own or  Cash Examples: I | Describe Describe Describe Describe Describe Your Fire have any legal   | busehold items you did not already list, including any health aids you did not list  books, CDs, DVDs & Family Photos  of your entries from Part 3, including any entries for pages you have attached her here   | \$ 100.00  \$ 0.00  \$ 300.00  \$ 1,100.00  Current value of the portion you own? Do not deduct secured claims     |  |  |  |

Case 17-25554 Doc 1 Lynne

Filed 08/25/17
Document F Entered 08/25/17 16:33:42 Page 12 of 56 humber (if known) Desc Main Debtor 1 First Name Middle Name

| 17. | Deposits of | f money             |  |  |                               |             |          |
|-----|-------------|---------------------|--|--|-------------------------------|-------------|----------|
|     |             |                     | , or other financial accounts; certificate<br>If you have multiple accounts with the |  | rokerage houses,              |             |          |
|     | Yes.        | Describe            | Account Type:  | Institution name:                        |                               |             |          |
|     |             |                     | Savings Account  | BMO Harris                               |                               | \$          | 200.00   |
|     |             |                     | Checking Account   | BMO Harris                               |                               | \$          | 1,000.00 |
|     |             |                     |  |  |                               | \$          | 1,200.00 |
| 18. |             |                     | ublicly traded stocks<br>ment accounts with brokerage firms, r                       | ney market accounts                      |                               | · <u></u> - |          |
|     | Yes.        | Describe            | Institution or issuer name:  |  |                               | \$          | 0.00     |
| 19. | Non-public  | ly traded stock     | and interests in incorporated a  | unincorporated businesses, i             | ncluding an interest in       | Φ           | 0.00     |
|     | Yes.        | Describe            | Name of Entity and Percent of C  | nership:                                 |                               |             |          |
|     | _           |                     |  |  |                               | \$          | 0.00     |
| 20. |             | =                   | e bonds and other negotiable a   | <del>-</del>                             |                               |             |          |
|     | -           |                     | e personal checks, cashiers' checks, pre those you cannot transfer to some           |  |                               |             |          |
|     | No.         |                     | ,  |  |                               |             |          |
|     | Yes.        | Describe            | Issuer name:   |  |                               | _           | 0.00     |
| 21. | Retirement  | or pension acc      | counts   |  |                               | \$          | 0.00     |
|     |             | -                   | RISA, Keogh, 401(k), 403(b), thrift sav  | gs accounts, or other pension or pro     | fit-sharing plans             |             |          |
|     | Yes.        | Describe            | Type of account and Institution r  | me:                                      |                               |             |          |
|     |             |                     | IRA  | IRA                                      |                               | \$          | 1,000.00 |
|     | 0           |                     |  |  |                               | \$          | 1,000.00 |
| 22. | =           | posits and pre      | payments osits you have made so that you may   | ntinue service or use from a compan      | AV.                           |             |          |
|     |             |                     | andlords, prepaid rent, public utilities (   |  |                               |             |          |
|     | Yes.        | Describe            | Institution name or individual:  |  |                               |             |          |
|     |             |                     | Security deposit on rental unit  | Landlord                                 |                               | \$          | 1,225.00 |
| 23. |             | A contract for a    | a periodic payment of money to   | ou, either for life or for a numb        | er of years)                  | \$          | 1,225.00 |
|     | No. Yes.    | Describe            | Issuer name and description:   |  |                               |             |          |
| 24. |             |                     | RA, in an account in a qualified   | BLE program, or under a quali            | fied state tuition program.   | \$          | 0.00     |
|     | No.         | g 550(b)(1), 529A   | (b), and 529(b)(1).  |  |                               |             |          |
|     | Yes.        | Describe            | Institution name and description   | Separately file the records of any       | interests.11 U.S.C. § 521(c): | \$          | 0.00     |
| 25. | Trusts, equ | itable or future    | interests in property (other tha   | anything listed in line 1), and r        | ights or powers               |             |          |
|     | Yes.        | Describe            |  |  |                               | \$          | 0.00     |
| 26. | Patents, co | pyrights, trade     | marks, trade secrets, and other  | tellectual property                      |                               | <b>~</b>    |          |
|     | Examples: I | nternet domain na   | ames, websites, proceeds from royaltic   | and licensing agreements                 |                               |             |          |
|     | Yes.        | Describe            |  |  |                               | \$          | 0.00     |
| 27. | Licenses, f | ranchises, and      | other general intangibles  |  |                               | *           |          |
|     | Examples: I | Building permits, e | exclusive licenses, cooperative associa  | on holdings, liquor licenses, profession | onal licenses                 |             |          |
|     | Yes.        | Describe            |  |  |                               | \$          | 0.00     |

Filed 08/25/17
Document F Case 17-25554 Doc 1 Lynne

Debtor 1

First Name Middle Name

Entered 08/25/17 16:33:42 Page 13 of 56 humber (if known) Desc Main

| Money or property owed to you?   | Current value of the portion you own?  Do not deduct secured claims or exemptions |
|--|---|
| 28. Tax refunds owed to you No.  |   |
| Yes. Describe  | \$0.00  |
| 29. Family support  Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement  No.  |   |
| Yes. Describe  | \$0.00  |
| 30. Other amounts someone owes you  Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else  No.              |   |
| Yes. Describe  | \$ 0.00   |
| 31. Interest in insurance policies  Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance  No. Company Name & Beneficiary:   |   |
| Yes. Describe  Health Insurance  | \$0   |
| 32. Any interest in property that is due you from someone who has died  If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.  No. | \$ 0.00   |
| Yes. Describe  | \$ 0.00   |
| 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue  |   |
| Yes. Describe  | \$0.00  |
| 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights  No.  Yes. Describe   |   |
| 35. Any financial assets you did not already list  | \$0.00  |
| No.  |   |
| Yes. Describe  | \$0.00  |
| 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here>   | \$3,425.00  |
| Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.   |   |
| 37. Do you own or have any legal or equitable interest in any business-related property?  No.  Yes.  |   |
|  | Current value of the portion you own? Do not deduct secured claims or exemptions  |
| 38. Accounts receivable or commissions you already earned No.  |   |
| Yes. Describe  | \$0.00  |

Filed 08/25/17 Entered 08/25/17 16:33:42

Document Page 14 of 56 umber (if known) Case 17-25554 Doc 1 Desc Main Debtor 1 Lynne First Name 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices Yes. Describe..... 0.00 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade Yes. Describe..... 0.00 41. Inventory No. Yes. Describe..... 0.00 42. Interests in partnerships or joint ventures No. Name of Entity and Percent of Ownership: Yes. Describe..... 0.00 43. Customer lists, mailing lists, or other compilations No. Yes. Describe..... 0.00 44. Any business-related property you did not already list Describe..... 0.00 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached \$ 0.00 for Part 5. Write that number here ----Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Describe..... Yes 0.00 47. Farm animals Examples: Livestock, poultry, farm-raised fish No. Yes. Describe..... 0.00 48. Crops-either growing or harvested No. Yes. Describe..... 0.00 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade No. Yes. Describe..... 0.00 50. Farm and fishing supplies, chemicals, and feed No. Yes. Describe.....

Schedule A/B: Property

51. Any farm- and commercial fishing-related property you did not already list

Record # 748167

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached

No. Yes.

Official Form 106A/B

Describe.....

0.00

0.00

\$0.00

Page 5 of 6

Case 17-25554 Doc 1 Filed 08/25/17 Lynne

First Name

Entered 08/25/17 16:33:42 Page 15 of as Sumber (if known) Desc Main <del>Döcument</del>

Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No. Yes. Describe..... 0.00 \$0.00 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... --> List the Totals of Each Part of this Form Part 8: \$ 0.00 55. Part 1: Total real estate, line 2 \$ 3,000.00 56. Part 2: Total vehicles, line 5 \$ 1,100.00 57. Part 3: Total personal and household items, line 15 58. Part 4: Total financial assets, line 36 \$ 3,425.00 59. Part 5: Total business-related property, line 45 \$ 0.00 \$ 0.00 60. Part 6: Total farm- and fishing-related property, line 52 61. Part 7: Total other property not listed, line 54 \$ 0.00 \$7,525.00 62. Total personal property. Add lines 56 through 61. ..... \$7,525.00 63. Total of all property on Schedule A/B. Add line 55 + line 62\$7,525.00

Official Form 106A/B Record # 748167 Page 6 of 6 Schedule A/B: Property

Case 17-25554 Doc 1 Filed 08/25/17 Entered 08/25/17 16:33:42 Desc Main

| Fill in this in           | nformation to iden   |                                       | NAAII MAAA | 1000 16 |
|---------------------------|----------------------|---------------------------------------|------------|---------|
| riii iii this ir          | normation to iden    | illy your case.                       |            |         |
| Debtor 1                  | Lynne                |                                       | Fotias     |         |
|                           | First Name           | Middle Name                           | Last Name  |         |
| Debtor 2                  |                      |                                       |            |         |
| (Spouse, if filing)       | First Name           | Middle Name                           | Last Name  |         |
| United States             | Bankruptcy Court for | r the : <u>NORTHERN</u> District of _ | ILLINOIS   |         |
| O N                       |                      |                                       | (State)    |         |
| Case Number<br>(If known) | r                    |                                       |            |         |

# Official Form 106C

### Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions-such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1F Identify the Property You Claim as Exempt   |   |                                      |                                       |                                    |  |  |  |  |
|---|---|--------------------------------------|---------------------------------------|------------------------------------|--|--|--|--|
| Which set of ex   | emptions are you claiming? Chec                                 | k one only, even if your sp          | ouse is filing with you.              |                                    |  |  |  |  |
| =   | ming state and federal nonbankrupt                              |                                      | § 522(b)(3)                           |                                    |  |  |  |  |
| You are clai  | ming federal exemptions. 11 U.S.C.                              | . § 522(b)(2)                        |                                       |                                    |  |  |  |  |
| _   |   |                                      |                                       |                                    |  |  |  |  |
| For any propert   | ty you list on <i>Schedule A/B</i> that yo                      | ou claim as exempt, fill in t        | the information below.                |                                    |  |  |  |  |
| •   | on of the property and line on<br>that lists this property      | Current value of the portion you own | Amount of the exemption you claim     | Specific laws that allow exemption |  |  |  |  |
|   |   | Copy the value from<br>Schedule A/B  | Check only one box for each exemption |                                    |  |  |  |  |
| Brief   | 2005 Buick LaCrosse with over                                   | 0.000                                |                                       | 735 ILCS 5/12-1001(c) - \$2,400.00 |  |  |  |  |
| description:  | 140,000 miles.  | \$_3,000                             | \$                                    | 735 ILCS 5/12-1001(b) - \$600.00   |  |  |  |  |
| Line from   | 00  |                                      | 100% of fair market value, up to      |                                    |  |  |  |  |
| Schedule A/B:   | 03  |                                      | any applicable statutory limit        | <del></del>                        |  |  |  |  |
| Brief   | Furniture, linens, small appliances,                            | \$ 300                               |                                       | 735 ILCS 5/12-1001(b) - \$300.00   |  |  |  |  |
| description:  | table & chairs, bedroom set                                     | \$_300                               | \$                                    |                                    |  |  |  |  |
| Line from   | 06  |                                      | 100% of fair market value, up to      |                                    |  |  |  |  |
| Schedule A/B:   | <u>00</u>   |                                      | any applicable statutory limit        |                                    |  |  |  |  |
| Brief description:  | Flat screen TV, computer, printer, music collection, cell phone | <sub>\$</sub> 100                    | <b>\_</b> \$                          | 735 ILCS 5/12-1001(b) - \$100.00   |  |  |  |  |
| description.  | music concetion, cen priorie                                    | \$                                   | <b>□</b> \$                           |                                    |  |  |  |  |
| Line from   | 07  |                                      | 100% of fair market value, up to      |                                    |  |  |  |  |
| Schedule A/B:   | <u> </u>  |                                      | any applicable statutory limit        |                                    |  |  |  |  |
| Brief description:  | Clothes   | <b>\$</b> 300                        | <b></b> \$                            | 735 ILCS 5/12-1001(a),(e) - \$0.00 |  |  |  |  |
| description.  |   | Ψ                                    |                                       | <del></del>                        |  |  |  |  |
| Line from   | 11  |                                      | 100% of fair market value, up to      |                                    |  |  |  |  |
| Schedule A/B: 11 any applicable statutory limit   |   |                                      |                                       |                                    |  |  |  |  |
|   |   |                                      |                                       |                                    |  |  |  |  |
|   |   |                                      |                                       |                                    |  |  |  |  |
| Official Form 106C Record # 748167 Schedule C: The Property You Claim as Exempt Page 1 of 2 |   |                                      |                                       |                                    |  |  |  |  |
| 11010111 1000   | , ittooru m   | Concadie O. I                        | no i roporty rou olumi ao Exempt      |                                    |  |  |  |  |

Case 17-25554 Doc 1 Filed 08/25/17 Entered 08/25/17 16:33:42 Desc Main

Document

Page 17 of 56 Case Number (if known)

Debtor 1 Lynne First Name

Middle Name

Last Name

| Part 2: Addit           | ional Page  |                                      |   |                                    |
|-------------------------|---|--------------------------------------|---|------------------------------------|
|                         | on of the property and line on that lists this property | Current value of the portion you own | Amount of the exemption you claim                               | Specific laws that allow exemption |
|                         |   | Copy the value from<br>Schedule A/B  | Check only one box for each exemption                           |                                    |
| Brief description:      | Jewelry   | \$ <u>100</u>                        | <b></b> \$  | 735 ILCS 5/12-1001(a),(e) - \$0.00 |
| Line from Schedule A/B: | 12  |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |
| Brief<br>description:   | books, CDs, DVDs & Family<br>Photos                     | \$ <u>300</u>                        | <b></b> \$  | 735 ILCS 5/12-1001(a) - \$300.00   |
| Line from Schedule A/B: | 14  |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |
| Brief description:      | Savings Account, BMO Harris, 200.00                     | \$_200                               | <b></b> \$  | 735 ILCS 5/12-1001(b) - \$200.00   |
| Line from Schedule A/B: | <u>17</u>   |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |
| Brief description:      | Checking Account, BMO Harris, 1,000.00                  | \$_1,000                             | <b></b> \$  | 735 ILCS 5/12-1001(b) - \$1,000.00 |
| Line from Schedule A/B: | <u>17</u>   |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |
| Brief description:      | IRA, IRA, 1,000.00                                      | \$_1,000                             | <b></b> \$  | 735 ILCS 5/12-1006 - \$0.00        |
| Line from Schedule A/B: | 21  |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |
| Brief description:      | Security deposit on rental unit,<br>Landlord, 1,225.00  | \$ <u>1,225</u>                      | <b></b> \$  | 735 ILCS 5/12-1001(b) - \$1,225.00 |
| Line from Schedule A/B: | 22  |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |
| 3. Are you claimin      | g a homestead exemption of mor                          | e than \$155,675?                    |   |                                    |
| (Subject to adjust      | stment on 4/01/16 and every 3 year                      | rs after that for cases filed o      | on or after the date of adjustment .)                           |                                    |
| No.                     | and the second second second second second              |                                      | describe for every filed this every 0                           |                                    |
| Yes. Did you            | acquire the property covered by the                     | ne exemption within 1,215 c          | days before you filed this case?                                |                                    |
| Yes.                    |   |                                      |   |                                    |
|                         |   |                                      |   |                                    |
|                         |   |                                      |   |                                    |
|                         |   |                                      |   |                                    |
|                         |   |                                      |   |                                    |
|                         |   |                                      |   |                                    |
|                         |   |                                      |   |                                    |
|                         |   |                                      |   |                                    |
|                         |   |                                      |   |                                    |
|                         |   |                                      |   |                                    |
|                         |   |                                      |   |                                    |
| Official Form 1060      | Record # 748167   | Schedule C: T                        | he Property You Claim as Exempt                                 | Page 2 of 2                        |

|                           |                         |  | Filad 09/25/17                | Entered 0          |                    | 6:33:42  | Desc Main  |                                |
|---------------------------|-------------------------|--|-------------------------------|--------------------|--------------------|--|--|--------------------------------|
| Fill in this in           | formation to identi     | fy your case:  | E 11                          | 8 of               | 56                 |  |  |                                |
| Debtor 1                  | Lynne                   |  | Fotias                        |                    |                    |  |  |                                |
| Debtor 2                  | First Name              | Middle Name  | Last Name                     |                    |                    |  |  |                                |
| (Spouse, if filing)       | First Name              | Middle Name  | Last Name                     |                    |                    |  |  |                                |
| United States Case Number |                         | he : <u>NORTHERN</u> District of   | ILLINOIS (State)              |                    |                    |  | Check if this                                      | s is an                        |
| (If known)                |                         |  |                               |                    |                    |  | amended fi   | ling                           |
|                           | orm 106D  D: Creditor   | s Who Have Clain   | ns Secured by F               | Property           |                    |  |  | 12/15                          |
| information. If r         | nore space is need      | ossible. If two married peopl<br>ed, copy the Additional Page<br>and case number (if known)          | e, fill it out, number the er |                    |                    |  | у  |                                |
| 1. Do any cre             | ditors have claims      | secured by your property?  |                               |                    |                    |  |  |                                |
| No. Ch                    | eck this box and su     | bmit this form to the court with   | h your other schedules. Yo    | ou have nothing el | se to report on th | is form.   |  |                                |
| Yes. Fil                  | I in all of the informa | ation below.   |                               |                    |                    |  |  |                                |
| Part 1:                   | List All Secured Clai   | ms   |                               |                    |                    |  |  |                                |
| 0 Linkallan               |                         |  |                               |                    | Colu               | ımn A  | Column A   | Column C                       |
| for each cl               | aim. If more than o     | reditor has more than one sec<br>ne creditor has a particular cla<br>claims in alphabetical order ac | aim, list the other creditors | in Part 2.         | Do r               | ount of claim<br>not deduct the<br>e of collateral | Value of collateral<br>that supports this<br>claim | Unsecured<br>portion<br>If any |
|                           |                         |  |                               |                    |                    |  |  |                                |

|  |   | Caso 17 25554  | Doc '  | 1 Eilad  | ∩9/25/1 <i>7</i>  | Entor                                     |   | 6:33:42   | Desc Main                 |                 |
|--|---|--|--|--|---|---|---|---|---------------------------|-----------------|
| Fill i   | n this inf  | formation to identify your case  | <b>:</b> :   |  |   |   | 9 of 56   |   |                           |                 |
| Debi   | tor 1   | Lynne  |  |  | Fotias  |   |   |   |                           |                 |
|  |   | First Name Mid   | ddle Name  |  | Last Name   |   |   |   |                           |                 |
| Debi   |   |  |  |  |   |   |   |   |                           |                 |
| (Spou  | se, if filing)  | First Name Min   | ddle Name  |  | Last Name   |   |   |   |                           |                 |
| Unite  | ed States I   | Bankruptcy Court for the : <u>NORTI</u>  | HERN_ Dis  | trict of <u>ILLINOI</u>  | S(State)  |   |   |   |                           |                 |
|  | e Number  |  |  |  | (====)  |   |   |   | <del></del>               | this is an      |
|  | nown)   | 4005/5   |  |  |   |   | I   |   | amende                    | d filing        |
| <u> Ottic</u>                                      | ial Fo  | orm 106E/F   |  |  |   |   |   |   |                           |                 |
| <u>sche</u>  | dule  | E/F: Creditors Who   | Have   | Unsecu   | red Claims  | <u> </u>                                  |   |   |                           | 12/15           |
| ist the<br>I/B: Pro<br>reditor<br>eeded<br>op of a | other pa<br>operty (C<br>rs with pa<br>, copy th<br>ny additi | and accurate as possible. Use<br>arry to any executory contracts<br>Official Form 106A/B) and on S<br>artially secured claims that are<br>e Part you need, fill it out, nun<br>ional pages, write your name a<br>ist All of Your PRIORITY Unsecu | s or unexpi<br>chedule G<br>e listed in S<br>nber the er<br>and case n | ired leases th<br>: Executory C<br>Schedule D: C<br>ntries in the b<br>umber (if kno | at could result in<br>Contracts and Une<br>Creditors Who Hav<br>oxes on the left. A | a claim. Al<br>expired Lea<br>ve Claims S | so list executory contra<br>uses (Official Form 1060<br>Secured by Property. If | cts on <i>Schedul</i><br>6). Do not includ<br>more space is | le                        |                 |
| Part   | 118   |  |  |  |   |   |   |   |                           |                 |
| 1. Do  | -   | litors have priority unsecured   | claims aga   | ainst you?   |   |   |   |   |                           |                 |
|  |   | to Part 2.   |  |  |   |   |   |   |                           |                 |
|  | Yes.  | our priority unsecured claims.   | If a credito   | r has more th  | an one priority uns   | secured clai                              | m list the creditor senar   | ately for each cla  | aim For                   |                 |
| ead<br>noi   | ch claim l<br>opriority a                                     | listed, identify what type of clain<br>amounts. As much as possible,<br>claims, fill out the Continuation I  | n it is. If a c<br>list the clai                                       | laim has both<br>ms in alphabe   | priority and nonpr  | riority amou<br>ing to the cr             | nts, list that claim here a<br>editor's name. If you hav                        | nd show both pr<br>ve more than two                         | riority and<br>o priority |                 |
| (Fo  | or an expl  | lanation of each type of claim, s  | see the inst   | ructions for thi   | s form in the instru  | uction book                               | let.)   | Total claim   | Priority                  | Nonpriority     |
|  |   |  |  |  |   |   |   |   | amount                    | amount          |
| Part   | 2: L  | ist All of Your NONPRIORITY Un   | secured Cl   | aims   |   |   |   |   |                           |                 |
| 3. <b>Do</b>                                       | any cred  | litors have nonpriority unsecu   | red claims   | against you?   | <b>?</b>  |   |   |   |                           |                 |
|  | No. You   | u have nothing to report in this p   | oart. Subm   | it this form to  | the court with your   | r other sche                              | edules.   |   |                           |                 |
|  | Yes.  |  |  |  |   |   |   |   |                           |                 |
| nor<br>inc   | npriority u<br>luded in F                                     | our nonpriority unsecured clai<br>unsecured claim, list the credito<br>Part 1. If more than one creditor<br>ut the Continuation Page of Part   | r separately<br>r holds a pa   | y for each clai  | m. For each claim   | listed, iden                              | tify what type of claim it  | is. Do not list cla   | aims already              |                 |
|  |   | ·  | . =.   |  |   |   |   |   |                           | Total claim     |
| 4.1  | COMEN<br>Creditor's N   | IITY BANK/Eddiebau   | _  | Last 4 digits o  | of account number   | NULI                                      |   |   |                           | \$ <u>47.00</u> |
|  |   | 22Nd Ave   | _  | When was the   | debt incurred?  | 2016                                      | -2017   |   |                           |                 |
|  | Number  | Street   |  |  |   |   |   |   |                           |                 |
|  |   |  | _ ,  |  | you file, the claim   | is: Check a                               | ll that apply.  |   |                           |                 |
|  | Westmin   | nster CO 80234   | 1  | Contingent Unliquidated  | 4   |   |   |   |                           |                 |
| w  | City  | State Zip Co the debt? Check one.  | de   | Disputed   | •   |   |   |   |                           |                 |
|  | Debtor 1  |  | '  | _  |   |   |   |   |                           |                 |
|  | Debtor 2  | ? only   |  | Type of NONP   | RIORITY unsecure  | ed claim:                                 |   |   |                           |                 |
|  | Debtor 1  | and Debtor 2 only  |  | Student load   | ns  |   |   |   |                           |                 |
|  | At least  | one of the debtors and another   |  | _  | arising out of a sepa   | _   | nent or divorce   |   |                           |                 |
|  | _   | if this claim relates to a<br>unity debt   | 1  | _  | not report as priority nsion or profit-sharing                                      |   | other similar dobto   |   |                           |                 |
| Is   |   | nity debt<br>1 subject to offest?  |  | Denis to be  | ision or brong-snatth   | iy piaris, ariu                           | outer Sittilial DEDIS   |   |                           |                 |
|  | No  |  |  | Other. Spec  | cify Credit Card  | or Credit Us                              | se  |   |                           |                 |
|  | Yes   |  | '  |  |   |   |   |   |                           |                 |

|          | First Name | Middle No.    |       | L4 N            |                                      |           |
|----------|------------|---------------|-------|-----------------|--------------------------------------|-----------|
| Debtor 1 | Lynne      |               |       | <b>Pagument</b> | Page 20 of 56 Case Number (if known) |           |
|          |            | Case 17-25554 | DOC T | Filed 08/25/17  | Efficied 08/25/17 10.33.42           | Desc Main |

| Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page |   |   |                               |                    |  |  |  |
|---|---|---|-------------------------------|--------------------|--|--|--|
| After list  | ting any entries on this page, number them b                        | peginning with 4.4, followed by 4.5, ar | nd so forth.                  | Total Claim        |  |  |  |
| 4.2   | Credit ONE BANK NA  | Last 4 digits of account number         | NULL                          | \$ <u>1,230.00</u> |  |  |  |
|   | Creditor's Name   |   | 2016 2017                     |                    |  |  |  |
| <u> </u>  | Po Box 98875  | When was the debt incurred?             | 2016-2017                     |                    |  |  |  |
|   | Number Street   |   |                               |                    |  |  |  |
| l .   |   | As of the date you file, the claim is:  | : Check all that apply.       |                    |  |  |  |
| l .   |   | Contingent                              |                               |                    |  |  |  |
|   | Las Vegas NV 89193  | Unliquidated                            |                               |                    |  |  |  |
|   | City State Zip Code no owes the debt? Check one.                    | Disputed                                |                               |                    |  |  |  |
|   | Debtor 1 only   |   |                               |                    |  |  |  |
| _ =   | Debtor 2 only   | Type of NONPRIORITY unsecured of        | claim:                        |                    |  |  |  |
| l ⊨   | Debtor 1 and Debtor 2 only  | Student loans                           |                               |                    |  |  |  |
|   | At least one of the debtors and another                             | Obligations arising out of a separati   |                               |                    |  |  |  |
| [   | Check if this claim relates to a                                    | that you did not report as priority cla |                               |                    |  |  |  |
| le :  | community debt<br>the claim subject to offest?                      | Debts to pension or profit-sharing p    | lans, and other similar debts |                    |  |  |  |
| 15  | No  | Cradit Card or                          | Cradit Haa                    |                    |  |  |  |
| ▎▐  | Yes   | Other. Specify Credit Card or           | Credit Ose                    |                    |  |  |  |
| 4.3   | MABT/Contfin  | Last 4 digits of account number         | NULL                          | <u>\$_501.27</u>   |  |  |  |
| _   | Creditor's Name   |   | 0047 0047                     |                    |  |  |  |
| -   | 121 Continental Dr Ste 1  | When was the debt incurred?             | 2017-2017                     |                    |  |  |  |
|   | Number Street   |   |                               |                    |  |  |  |
|   |   | As of the date you file, the claim is:  | : Check all that apply.       |                    |  |  |  |
|   |   | Contingent                              |                               |                    |  |  |  |
|   | Newark DE 19713   | Unliquidated                            |                               |                    |  |  |  |
|   | City State Zip Code   | Disputed                                |                               |                    |  |  |  |
| 1 111   | Debtor 1 only   |   |                               |                    |  |  |  |
|   | Debtor 2 only   | Type of NONPRIORITY unsecured           | olaim:                        |                    |  |  |  |
| ⊨   | , '   | Student loans                           | ciaiii.                       |                    |  |  |  |
| ⊨   | Debtor 1 and Debtor 2 only  At least one of the debtors and another | Obligations arising out of a separati   | ion agreement or divorce      |                    |  |  |  |
| ⊨   | 1   | that you did not report as priority cla |                               |                    |  |  |  |
| -   | Check if this claim relates to a community debt                     | Debts to pension or profit-sharing p    |                               |                    |  |  |  |
| Is  | the claim subject to offest?  | Bests to perision or profit sharing p   | idio, and other similar debte |                    |  |  |  |
|   | No  | Other. Specify Credit Card or           | Credit Use                    |                    |  |  |  |
|   | Yes   |   |                               |                    |  |  |  |
| 4.4   | Merrick BANK CORP   | Last 4 digits of account number         | NULL                          | \$ <u>1,561.00</u> |  |  |  |
|   | Creditor's Name   |   | 2016-2017                     |                    |  |  |  |
| -   | Po Box 9201   | When was the debt incurred?             | 2010-2017                     |                    |  |  |  |
|   | Number Street   |   |                               |                    |  |  |  |
| .   |   | As of the date you file, the claim is:  | : Check all that apply.       |                    |  |  |  |
|   | Old Bethpage NY 11804   | Contingent                              |                               |                    |  |  |  |
| -   |   | Unliquidated                            |                               |                    |  |  |  |
|   | City State Zip Code no owes the debt? Check one.                    | Disputed                                |                               |                    |  |  |  |
|   | Debtor 1 only   |   |                               |                    |  |  |  |
|   | Debtor 2 only   | Type of NONPRIORITY unsecured of        | claim:                        |                    |  |  |  |
|   | Debtor 1 and Debtor 2 only  | Student loans                           |                               |                    |  |  |  |
| _ =   | At least one of the debtors and another                             | Obligations arising out of a separati   | ion agreement or divorce      |                    |  |  |  |
| _ =   | Check if this claim relates to a                                    | that you did not report as priority cla |                               |                    |  |  |  |
| -   | community debt  | Debts to pension or profit-sharing p    |                               |                    |  |  |  |
| _   | the claim subject to offest?  | _                                       |                               |                    |  |  |  |
| _ =   | No<br>I   | Other. Specify Credit Card or           | Credit Use                    |                    |  |  |  |
|   | Yes   |   |                               |                    |  |  |  |

| 1 Lynne                                 | Le ofias difficilit                        | Case Number (if known)         |                     |
|---|--|--------------------------------|---------------------|
| First Name Middle Name  Nordstrom FSB   | Last Name  Last 4 digits of account number | NULL                           | <b>\$_10,483.00</b> |
| Creditor's Name 13531 E Caley Ave       | When was the debt incurred?                | 2011-2017                      |                     |
| Number Street                           | As of the date you file, the claim is      | : Check all that apply.        |                     |
| Englewood CO 80111 City State Zip Code  | Contingent Unliquidated                    |                                |                     |
| Who owes the debt? Check one.           | Disputed                                   |                                |                     |
| Debtor 1 only                           |  |                                |                     |
| Debtor 2 only                           | Type of NONPRIORITY unsecured              | claim:                         |                     |
| Debtor 1 and Debtor 2 only              | Student loans                              |                                |                     |
| At least one of the debtors and another | Obligations arising out of a separat       | •                              |                     |
| Check if this claim relates to a        | that you did not report as priority cla    |                                |                     |
| community debt                          | Debts to pension or profit-sharing p       | plans, and other similar debts |                     |
|   |  |                                |                     |
| Is the claim subject to offest?         |  |                                |                     |
| Is the claim subject to offest?         | Other. Specify Credit Card or              | Credit Use                     |                     |

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Case 17-25554 Doc 1 Filed 08/25/17 Entered 08/25/17 16:33:42 Desc Main **Pacument** Page 22 of 56 Case Number (if known)

Lynne Debtor 1

13,822.27

Add the Amounts for Each Type of Unsecured Claim

| rait                     | and the Amounts for Each Type of Unsecured Claim  |                    |   |
|--------------------------|---|--------------------|---|
|                          | nounts of certain types of unsecured claims. This information is ounts for each type of unsecured claim.    | for statistical re | porting purposes only. 28 U.S.C. § 159. |
|                          |   |                    | Total claim                             |
| Total claims from Part 1 | 6a. Domestic support obligations  | 6a.                | \$0.00                                  |
|                          | 6b. Taxes and Certain other debts you owe the government  | 6b.                | \$0.00                                  |
|                          | 6c. Claims for death or personal injury while you were intoxicated  | 6c.                | \$0.00                                  |
|                          | 6d. <b>Other.</b> Add all other priority unsecured claims. Write that amount here.                          | 6d.                | \$0.00                                  |
|                          | 6e. <b>Total.</b> Add lines 6a through 6d.  | 6e.                | \$0.00                                  |
|                          |   |                    | Total claim                             |
| Total claims from Part 2 | 6f. Student loans   | 6f.                | \$0.00                                  |
|                          | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g.                | \$0.00                                  |
|                          | 6h. Debts to pension or profit-sharing plans, and other similar debts                                       | 6h.                | \$0.00                                  |
|                          | 6i. Other. Add all other nonpriority unsecured claims.  | 6i.                | \$13,822.27                             |

Write that amount here.

6j. Total. Add lines 6f through 6i.

|                          |                                       | Casa   | 17 2555/   | Doc 1  | Eilad Nº                                       | )/2E/17       | Ento       | rad no      | 0/05/17                     | 7 16:22      | . 42                  | Doco   | Main   |         |      |
|--------------------------|---------------------------------------|--|--|--|--|---------------|------------|-------------|-----------------------------|--------------|-----------------------|--------|--|---------|------|
| Fill                     | l in this in                          |  | dentify your case:   |  |  |               |            | 3 of !      | 56                          | 10.55        | .42                   | Desc   | Maili  |         |      |
| De                       | ebtor 1                               | Lynne  |  |  | Fo   | otias         |            |             |                             |              |                       |        |  |         |      |
| 50                       | ,5101 1                               | First Name   | Middle   | Name   | Last   | Name          |            |             |                             |              |                       |        |  |         |      |
|                          | ebtor 2                               |  |  |  |  |               |            |             |                             |              |                       |        |  |         |      |
| (Sp                      | ouse, if filing)                      | First Name   | Middle   | Name   | Last   | Name          |            |             |                             |              |                       |        |  |         |      |
| Ur                       | nited States                          | Bankruptcy Cour                                    | rt for the : <u>NORTHE</u>   | RN_ District                                 | of <u>ILLINOIS</u><br>(Sta                     | ate)          |            |             |                             |              |                       |        | 0  |         |      |
|                          | se Number<br>known)                   |  |  |  |  |               |            |             |                             |              |                       |        | Check if the amended to the contract the con |         |      |
| Offi                     | cial F                                | orm 106  | G  |  |  |               |            | _           |                             |              |                       | ·      | amenaca  | iiii ig |      |
|                          |                                       |  | <u>으</u><br>utory Contra   | acte an                                      | d Unevni                                       | red I ea      | 202        |             |                             |              |                       |        |  | 1       | 2/15 |
| Be as<br>nform<br>additi | complete<br>nation. If n<br>onal page | and accurate<br>nore space is i<br>s, write your n | as possible. If two<br>needed, copy the a<br>name and case num<br>ory contracts or une | married peo<br>dditional pa<br>iber (if know | ople are filing t<br>ge, fill it out, n<br>n). | ogether, botl | n are equa | lly respon  | nsible for s<br>to this pag | supplying o  | correct<br>top of any | y      |  |         |      |
|                          | No. Ch                                | eck this box ar                                    | nd submit this form t  | to the court v                               | vith your other                                | schedules. Yo | ou have no | othing else | e to report                 | on this form | ۱.                    |        |  |         |      |
|                          | Yes. Fil                              | I in all of the int                                | formation below eve  | en if the cont                               | racts or leases                                | are listed in | Schedule / | A/B: Prop   | erty (Offici                | al Form 106  | 6A/B)                 |        |  |         |      |
| ex                       | -                                     | nt, vehicle lea                                    | on or company with<br>se, cell phone). Se  | -  |  |               |            |             |                             |              | -                     |        |  |         |      |
|                          | Person or                             | company with                                       | whom you have th   | ne contract (                                | or lease                                       |               |            | Sta         | ate what th                 | e contract   | or lease              | is for |  |         |      |
| 2.1                      | Alice an                              | d Marty Martin                                     | l  |  |  |               | -          |             |                             |              |                       |        |  |         |      |
|                          | Name<br>6115 Tir                      | mber Ridge   |  |  |  |               |            |             |                             |              |                       |        |  |         |      |
|                          | Number                                | Street   |  |  |  |               | -          |             |                             |              |                       |        |  |         |      |
|                          | Indian H                              | lead Park  |  |  | 60525  |               | -          |             |                             |              |                       |        |  |         |      |
| 2.2                      | City                                  |  |  | State  | Zip Code                                       |               |            |             |                             |              |                       |        |  |         |      |
|                          | Name                                  |  |  |  |  |               | -          |             |                             |              |                       |        |  |         |      |
|                          | Number                                | Street   |  |  |  |               | -          |             |                             |              |                       |        |  |         |      |
|                          | City                                  |  |  | State  | Zip Code                                       |               | -          |             |                             |              |                       |        |  |         |      |
| 2.3                      |                                       |  |  |  |  |               |            |             |                             |              |                       |        |  |         |      |
| 2.5                      | Name                                  |  |  |  |  |               | -          |             |                             |              |                       |        |  |         |      |
|                          | Number                                | Street   |  |  |  |               | -          |             |                             |              |                       |        |  |         |      |
|                          | Number                                | Sueet  |  |  |  |               |            |             |                             |              |                       |        |  |         |      |
|                          | City                                  |  |  | State  | Zip Code                                       |               | -          |             |                             |              |                       |        |  |         |      |
| 2.4                      |                                       |  |  |  |  |               |            |             |                             |              |                       |        |  |         |      |
|                          | Name                                  |  |  |  |  |               | -          |             |                             |              |                       |        |  |         |      |
|                          | Number                                | Street   |  |  |  |               | -          |             |                             |              |                       |        |  |         |      |
|                          | City                                  |  |  | State  | Zip Code                                       |               | -          |             |                             |              |                       |        |  |         |      |
| 2.5                      |                                       |  |  |  |  |               |            |             |                             |              |                       |        |  |         |      |
| _                        | Name                                  |  |  |  |  |               | -          |             |                             |              |                       |        |  |         |      |
|                          | Number                                | Street   |  |  |  |               | -          |             |                             |              |                       |        |  |         |      |

State Zip Code

City

Case 17-25554 Doc 1 Filed 08/25/17 Entered 08/25/17 16:33:42 Desc Main

| Fill in this information to identify your case:  | Dooumont                               |
|--|--|
|  |  |
| Debtor 1 Lynne                                   | Fotias                                 |
| First Name Middle Name                           | Last Name                              |
| Debtor 2   |  |
| (Spouse, if filing) First Name Middle Name       | Last Name                              |
| United States Bankruptcy Court for the :NORTHERN | District of <u>ILLINOIS</u><br>(State) |
| Case Number                                      | (State)                                |
| (If known)                                       |  |

# Official Form 106H

Schedule H: Your Codebtors 12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| any A       | dditional Pages, wr | te your name and case numbe  | r (if known). Answer every     | question.           |  |
|-------------|---------------------|--|--------------------------------|---------------------|--|
| 1. <b>D</b> | o you have any coo  | ebtors? (If you are filing a joint                                       | case, do not list either spous | se as a codebtor.)  |  |
|             | No.                 |  |                                |                     |  |
|             | Yes                 |  |                                |                     |  |
|             | =                   | s, have you lived in a commur<br>aho, Lousiiana, Nevada, New M           |                                |                     | roperty states and territories include<br>Visconsin.)                            |
|             | No. Go to line 3.   |  |                                |                     |  |
|             | Yes. Did your sp    | ouse, former spouse, or legal ec   | uivalent live with you at the  | time?               |  |
|             | _                   | n community state or territory die                                       | d you live?                    | Fill in the n       | ame and current address of that person.  |
|             | Name of your spo    | use, former spouse or legal equivalent                                   |                                |                     |  |
|             | Number St           | reet   |                                |                     |  |
|             | City                |  | State                          | Zip Code            |  |
| 3 In        | -                   | f vour codebtors. Do not inclu   |                                | •                   | is filing with you. List the person  |
|             |                     | Form 106D), Schedule E/F (Off<br>edule G to fill out Column 2.<br>debtor | icial Form 106E/F), or Sche    | dule G (Official Fo | Column 2: The creditor to whom you owe the debt  Check all schedules that apply: |
| 3.1         |                     |  |                                |                     | Schedule D, line   |
|             | Name                |  |                                | _                   | Schedule E/F, line   |
|             | Number Stre         | et   |                                |                     | Schedule G, line   |
|             | City                | S  | tate Z                         | Zip Code            |  |
| 3.2         |                     |  |                                | _                   | Schedule D, line   |
|             | Name                |  |                                | _                   | Schedule E/F, line   |
|             | Number Stre         | et   |                                | _                   | Schedule G, line   |
|             | City                | S  | tate Z                         | Zip Code            | _  |
| 3.3         |                     |  |                                | _                   | Schedule D, line   |
|             | Name                |  |                                | _                   | Schedule E/F, line   |
|             | Number Stre         | et   |                                |                     | Schedule G, line   |
|             | City                | S  | tate Z                         | Zip Code            |  |

Official Form 106H Record # 748167 Schedule H: Your Codebtors Page 1 of 1

Case 17-25554 Doc 1 Filed 08/25/17 Entered 08/25/17 16:33:42 Desc Main Document Page 25 of 56

|                     |                     |                          | 1700.1111111111111111111111111111111111 | PAUE 7.3 01 30                          |
|---------------------|---------------------|--------------------------|---|---|
| Fill in this in     | nformation to ident | tify your case:          |   |   |
| Debtor 1            | Lynne               |                          | Fotias                                  |   |
|                     | First Name          | Middle Name              | Last Name                               |   |
| Debtor 2            |                     |                          |   |   |
| (Spouse, if filing) | First Name          | Middle Name              | Last Name                               |   |
| Case Number         |                     | the :NORTHERN DISTRICT C |   | Check if this is:                       |
| (If known)          |                     |                          |   | An amended filing                       |
|                     |                     |                          |   | A supplement showing post-petition      |
|                     |                     |                          |   | chapter 13 income as of the following d |
| fficial C           | orm 1061            |                          |   | <del></del>                             |
| iliciai F           | <u>orm 106l</u>     |                          |   | MM / DD / YYYY                          |
|                     |                     |                          |   |   |

#### **Schedule I: Your Income**

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: Describe Employment   |   |                            |                        |                                   |
|----|---|---|----------------------------|------------------------|-----------------------------------|
| 1. | Fill in your employment information   |   | Debtor 1                   |                        | Debtor 2 or non-filing spouse     |
|    | If you have more than one job, attach a separate page with information about additional employers.  | Employment status   | X Employed Not employed    | 1                      | Employed  Not employed            |
|    | Include part-time, seasonal, or self-employed work.   | Occupation  | Membership                 |                        |                                   |
|    | Occupation may Include student or homemaker, if it applies.   | Employers name  | Five Seasons Spo           | orts Country Club of B |                                   |
|    |   | Employers address   | 6901 S. Madison S          | St.                    |                                   |
|    |   |   | Burr Ridge, IL 605         | 521                    | ,                                 |
|    |   |   |                            |                        |                                   |
|    |   | How long employed there?  | Since 4/1/2017             |                        |                                   |
| Pa | rt 2: Give Details About Monthl   | y Income  |                            |                        |                                   |
|    | Estimate monthly income as of the spouse unless you are separated. If you or your non-filing spouse has lines below. If you need more space | ve more than one employer, comb                                       | oine the information for a |                        | , G                               |
|    |   |   |                            | For Debtor 1           | For Debtor 2 or non-filing spouse |
| 2. | List monthly gross wages, salar deductions). If not paid monthly, o   | y and commissions (before all pa<br>calculate what the monthly wage w | •                          | \$2,500.01             | \$0.00                            |
| 3. | Estimate and list monthly overting  | me pay.   |                            | \$0.00                 | \$0.00                            |
| 4. | Calculate gross income. Add line  | e 2 + line 3.   |                            | \$2,500.01             | \$0.00                            |
|    |   |   |                            |                        |                                   |

Official Form 106I Record # 748167 Schedule I: Your Income Page 1 of 2

Case 17-25554 Doc 1 Filed 08/25/17 Entered 08/25/17 16:33:42 Desc Main Document Page 26 of 56

Debtor 1 Lynne

Lynne Document Fotias Page 26 of 56
Case Number (if known)
Last Name

|             |              |   |              | For Debtor 1              | For Debtor 2 or non-filing spouse |                       |
|-------------|--------------|---|--------------|---------------------------|-----------------------------------|-----------------------|
|             | Cop          | y line 4 here   | 4.           | \$2,500.01                | \$0.00                            |                       |
| 5. <b>I</b> |              | payroll deductions:   |              |                           |                                   |                       |
|             |              | ax, Medicare, and Social Security deductions  | 5a.          | \$552.54                  | \$0.00                            |                       |
|             |              | Mandatory contributions for retirement plans  | 5b.          | \$0.00                    | \$0.00                            |                       |
|             | 5c. <b>\</b> | oluntary contributions for retirement plans   | 5c.          | \$0.00                    | \$0.00                            |                       |
|             |              | Required repayments of retirement fund loans  | 5d.          | \$0.00                    | \$0.00                            |                       |
|             |              | nsurance  | 5e.          | \$253.09                  | \$0.00                            |                       |
|             |              | Omestic support obligations   | 5f.          | \$0.00                    | \$0.00                            |                       |
|             | _            | Jnion dues  | 5g.          | \$0.00                    | \$0.00                            |                       |
|             |              | Other deductions. Specify:  | 5h.          | \$0.00                    | \$0.00                            |                       |
|             |              | payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h.  | 6.           | \$805.63                  | \$0.00                            |                       |
|             |              | te total monthly take-home pay. Subtract line 6 from line 4.  | 7.           | \$1,694.38                | \$0.00                            |                       |
| 8. <b>L</b> |              | other income regularly received:  |              |                           |                                   |                       |
|             | 8a.          | Net income from rental property and from operating a business,  |              |                           |                                   |                       |
|             |              | profession, or farm   |              |                           |                                   |                       |
|             |              | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total                             |              |                           |                                   |                       |
|             |              | monthly net income.   | 8a.          | \$0.00                    | \$0.00                            |                       |
|             | 8b.          | Interest and dividends  | 8b.          | \$0.00                    | \$0.00                            |                       |
|             | 8c.          | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce | 8c.          | \$ 0.00                   | \$ 0.00                           |                       |
|             |              | settlement, and property settlement.  |              |                           |                                   |                       |
|             | 8d.          | Unemployment compensation   | 8d.          | \$0.00                    | \$0.00                            |                       |
|             | 8e.          | Social Security   | 8e.          | \$0.00                    | \$0.00                            |                       |
|             | 8f.          | Other government assistance that you regularly receive  | 8f.          | \$0.00                    | \$0.00                            |                       |
|             | Oi.          | Include cash assistance and the value (if known) of any non-cash  | 01.          | φυ.υυ                     | φυ.υυ                             |                       |
|             |              | assistance that you receive, such as food stamps (benefits under the  |              |                           |                                   |                       |
|             |              | Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  |              |                           |                                   |                       |
|             | 8g.          | Pension or retirement income  | 8g.          | \$0.00                    | \$0.00                            |                       |
|             | 8h.          | Other monthly income. Specify:Bonus,  | 8h.          | \$350.00                  | \$0.00                            |                       |
| 9.          | Add          | <b>all other income</b> . Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.   | 9.           | \$350.00                  | \$0.00                            |                       |
| 10.         |              | ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.   | 10.          | \$2,044.38 +              | \$0.00                            | \$2,044.38            |
| 11.         | State        | e all other regular contributions to the expenses that you list in <i>Schedule</i>  | . <i>. l</i> |                           |                                   |                       |
|             | Inclu        | de contributions from an unmarried partner, members of your household, your friends or relatives.   |              | ents, your roommates, and |                                   |                       |
|             |              | ot include any amounts already included in lines 2-10 or amounts that are n   | ot available | to pay expenses listed in | Schedule J.                       |                       |
|             |              | cify:   |              |                           |                                   | 1. \$0.00             |
| 12.         |              | the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Ce            |              | •                         | applies                           | 12. <b>\$2,044.38</b> |
| 13.         | Do y         | ou expect an increase or decrease within the year after you file this form  | ?            |                           |                                   |                       |
|             | X            | No.<br>Yes. Explain:  |              |                           |                                   |                       |
|             |              |   |              |                           |                                   |                       |

| Fill in this in                 | formation to identify your                 | case:                 |   |                        |                              |                   |                               |        |
|---------------------------------|--|-----------------------|---|------------------------|------------------------------|-------------------|-------------------------------|--------|
| Debtor 1                        | Lynne<br>First Name                        | Middle Name           | Fotias<br>Last Name                                       | Che                    | ck if this is:<br>An amended | l filing          |                               |        |
| Debtor 2<br>(Spouse, if filing) | First Name                                 | Middle Name           | Last Name   |                        |                              |                   | -petition chapter 13          |        |
|                                 | Bankruptcy Court for the :                 |                       |   |                        | income as of                 | the following d   | late:                         |        |
| Case Number                     |  |                       |   |                        | MM / DD / Y                  | YYY               |                               |        |
| (If known)                      | orm 106 l                                  |                       |   | $oxed{oxed}$ $\Box$    |                              |                   | 2 because Debtor 2            |        |
| Official Fo                     |  |                       |   | _                      | maintains a                  | separate house    | hold.                         |        |
|                                 | e J: Your Exp                              |                       | le are filing together, both a                            | aro oqually rosponsibl | o for supplying              | a correct informa | ation If                      | 12/14  |
| · ·                             |  |                       | ne top of any additional pag                              |                        |                              | =                 |                               |        |
| Part 1: D                       | escribe Your Household                     |                       |   |                        |                              |                   |                               |        |
| 1. Is this a join               | nt case?<br>So to line 2.                  |                       |   |                        |                              |                   |                               |        |
|                                 | Does Debtor 2 live in a se                 | parate household?     |   |                        |                              |                   |                               |        |
| _                               | No. Yes. Debtor 2 must f                   | ile a separate Schedu | e J.  |                        |                              |                   |                               |        |
| _                               | ave dependents?                            | X No                  | this information for                                      | Dependent's relati     |                              | Dependent's age   | Does dependent live with you? |        |
| Debtor 2.                       | t Debtor 1 and                             |                       | this information for dent                                 |                        |                              |                   | X No                          |        |
|                                 | ate the dependents'                        |                       |   |                        |                              |                   | Yes                           |        |
| names.                          |  |                       |   |                        |                              |                   | X No                          |        |
|                                 |  |                       |   |                        |                              |                   | Yes                           |        |
|                                 |  |                       |   |                        |                              |                   | Yes                           |        |
|                                 |  |                       |   |                        |                              |                   | X No                          |        |
|                                 |  |                       |   |                        |                              |                   | Yes                           |        |
|                                 |  |                       |   |                        |                              |                   | X No                          |        |
|                                 |  |                       |   |                        |                              |                   | Yes                           |        |
| _                               | expenses include<br>s of people other than | X No                  |   |                        |                              |                   |                               |        |
| yourself                        | and your dependents?                       | Yes                   |   |                        |                              |                   |                               |        |
| Part 2:                         | stimate Your Ongoing Mon                   | thly Expenses         |   |                        |                              |                   |                               |        |
| -                               | -  |                       | ess you are using this form<br>supplemental Schedule J,   |                        | =                            | -                 |                               |        |
| the applicable                  |  |                       |   |                        |                              |                   |                               |        |
|                                 | -  | =                     | nce if you know the value<br>Income (Official Form 106l.) | )                      |                              | Y                 | our expenses                  |        |
| 4. The rent                     | al or home ownership exp                   | penses for your resid | ence. Include first mortgage                              | payments and           |                              |                   |                               |        |
| _                               | for the ground or lot.                     |                       |   |                        |                              | 4.                | \$1,22                        | 25.00  |
|                                 | cluded in line 4:                          |                       |   |                        |                              | 40                |                               | \$0.00 |
|                                 | al estate taxes operty, homeowner's, or re | nter's insurance      |   |                        |                              | 4a.<br>4b.        |                               | \$0.00 |
|                                 | me maintenance, repair, a                  |                       |   |                        |                              | 4c.               |                               | 20.00  |
|                                 | meowner's association or                   |                       |   |                        |                              | 4d.               |                               | \$0.00 |
| 1                               |  |                       |   |                        |                              |                   |                               |        |

Case 17-25554 Doc 1 Filed 08/25/17 Entered 08/25/17 16:33:42 Desc Main

Document

Last Name

Page 28 of 56 Case Number (if known) \_\_

Your expenses \$0.00 5 Additional Mortgage payments for your residence, such as home equity loans 6. **Utilities:** \$0.00 6a. 6a. Electricity, heat, natural gas \$0.00 6b. Water, sewer, garbage collection \$50.00 Telephone, cell phone, internet, satellite, and cable service \$ 0.00 Other. Specify: 6d. \$250.00 7. 7. Food and housekeeping supplies \$0.00 8. 8. Childcare and children's education costs \$55.00 9. Clothing, laundry, and dry cleaning 10. \$20.00 Personal care products and services 10. \$25.00 11. Medical and dental expenses 11. \$115.00 **Transportation.** Include gas, maintenance, bus or train fare. 12. Do not include car payments. \$0.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. \$0.00 Charitable contributions and religious donations 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. \$0.00 15a. 15a. Life insurance \$0.00 15b. Health insurance 15b. \$80.00 15c. Vehicle insurance 15c. \$0.00 15d. 15d. Other insurance. Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 16 17. Installment or lease payments: \$0.00 17a. 17a. Car payments for Vehicle 1 \$0.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. 17c. Other. Specify:\_ \$0.00 17d. Other. Specify: 17d. 18. Your payments of alimony, maintenance, and support that you did not report as deducted \$0.00 from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. \$0.00 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.00 20b. \$ 0.00 20b. Real estate taxes \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. 20d. Maintenance, repair, and upkeep expenses \$ 0.00 20e 20e. Homeowner's association or condominium dues

Official Form 106J Record # 748167

Debtor 1

Lynne

First Name

Middle Name

Lynne Debtor 1 Case Number (if known) \_ First Name Middle Name Last Name \$0.00 21. 21. Other. Specify: \_ 22.. Your monthly expense: Add lines 4 through 21. \$1,840.00 22. The result is your monthly expenses. 23. Calculate your monthly net income. \$2,044.38 23a. 23a. Copy line 12 (your comibined monthly income) from Schedule I. \$1,840.00 23b. Copy your monthly expenses from line 22 above. 23b.-\$204.38 23c. Subtract your monthly expenses from your monthly income. 23c. The result is your monthly net income. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? X No Explain Here: Yes.

Official Form 106J Record # 748167 Schedule J: Your Expenses Page 3 of 3

| Fill in this in            | ill in this information to identify your case: |                                   |                     |  |  |  |
|----------------------------|--|-----------------------------------|---------------------|--|--|--|
| Debtor 1                   | Lynne  |                                   | Fotias              |  |  |  |
|                            | First Name                                     | Middle Name                       | Last Name           |  |  |  |
| Debtor 2                   |  |                                   |                     |  |  |  |
| (Spouse, if filing)        | First Name                                     | Middle Name                       | Last Name           |  |  |  |
| United States  Case Number |  | the : <u>NORTHERN</u> District of | ILLINOIS<br>(State) |  |  |  |
| (If known)                 |  |                                   |                     |  |  |  |

## Official Form 106 Dec

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below   |   |
|--|---|
| Did you pay or agree to pay someone who is NC              | OT an attorney to help you fill out bankruptcy forms?   |
| Yes. Name of Person  | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
|  |   |
| Under penalty of perjury, I declare that I have recorrect. | ad the summary and schedules filed with this declaration and that they are true and           |
| <b>4.</b>  |   |
| /s/ Lynne Fotias Signature of Debtor 1                     | Signature of Debtor 2   |
| Date 08/24/2017<br>MM / DD / YYYY                          | Date  |
|  |   |

Case 17-25554 Doc 1 Filed 08/25/17 Entered 08/25/17 16:33:42 Desc Main

|                     |                  |   | Joannent  | GGC CT ( |
|---------------------|------------------|---|-----------|----------|
| Fill in this in     | formation to ide | entify your case:                       |           |          |
| Debtor 1            | Lynne            |   | Fotias    |          |
| Debtor 1            | First Name       | Middle Name                             | Last Name |          |
| Debtor 2            |                  |   |           | _        |
| (Spouse, if filing) | First Name       | Middle Name                             | Last Name |          |
| United States       | Bankruptcy Court | for the : <u>NORTHERN</u> District of _ |           |          |
| Case Number         | r                |   | (State)   |          |
| (If known)          | ·                |   | _         |          |
|                     |                  |   |           |          |

# Official Form 107

#### Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| iliber (il kilowii). A          | Answer every question.                   |                              |                                      |                |
|---------------------------------|--|------------------------------|--------------------------------------|----------------|
| Part 1: Give D                  | etails About Your Marital Status and W   | /here You Lived Before       |                                      |                |
|                                 | urrent marital status?                   |                              |                                      |                |
| _                               |  |                              |                                      |                |
| Married                         |  |                              |                                      |                |
| Not married                     |  |                              |                                      |                |
| o <b>B</b> . day that had       | O combination of Product Income          |                              |                                      |                |
| During the last                 | 3 years, have you lived anywhere of      | ther than where you live no  | w?                                   |                |
| <del></del>                     | of the places you lived in the last 3 ye | ears. Do not include where v | ou live now.                         |                |
|                                 |  |                              |                                      |                |
| Debtor 1                        |  | Dates Debtor 1               | Debtor 2:                            | Dates Debtor 2 |
|                                 |  | lived there                  |                                      | lived there    |
|                                 |  |                              | Same as Debtor 1                     | Same as Debtor |
|                                 | Center Dr #213                           | FROM 12/2013                 |                                      |                |
| Burr Ridge                      | IL 60527-4546                            | To 03/2017                   |                                      |                |
|                                 |  |                              |                                      |                |
|                                 |  |                              |                                      |                |
| and Wisconsin  No.  Yes. Make s |  |                              | evada, New Mexico, Puerto Rico, Texa | -,             |
|                                 |  |                              |                                      |                |
|                                 |  |                              |                                      |                |
|                                 |  |                              |                                      |                |
|                                 |  |                              |                                      |                |
|                                 |  |                              |                                      |                |
|                                 |  |                              |                                      |                |
|                                 |  |                              |                                      |                |
|                                 |  |                              |                                      |                |
|                                 |  |                              |                                      |                |
|                                 |  |                              |                                      |                |
|                                 |  |                              |                                      |                |

Case 17-25554 Doc 1 Filed 08/25/17 Entered 08/25/17 16:33:42 Desc Main Document Page 32 of 56

Debtor 1 Lynne Fotias Case Number (if known) First Name Middle Name Last Name 04 Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. ☐ No. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply (before deductions and Check all that apply (before deductions and exclusions) exclusions) Wages, commissions, \$13,065.14 Wages, commissions, From January 1 of current year until bonuses, tips bonuses, tips the date you filed for bankruptcy: Operating a business Operating a business Wages, commissions, Wages, commissions, \$36,263 For last calendar year: bonuses, tips bonuses, tips (January 1 to December 31, 2016) Operating a business Operating a business Wages, commissions, Wages, commissions, \$42,722 For the calendar year before that: bonuses, tips bonuses, tips (January 1 to December 31, 2015) Operating a business Operating a business 05 Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Describe below. (before deductions and Describe below. (before deductions and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

Case 17-25554 Doc 1 Filed 08/25/17 Entered 08/25/17 16:33:42 Desc Main Document Page 33 of 56

Lynne Fotias Case Number (if known) \_ Debtor 1 First Name Middle Name Last Name Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,225\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of Total amount paid Amount you still owe Was this payment for... payments Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No. Yes. List all payments to an insider. Dates of **Total amount** Amount you still Reason for this payment payment paid owe 08 Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Nο Yes. List all payments to an insider. Dates of **Total amount** Amount you still Reason for this payment Include creditor's name payment Identify Legal actions, Repossessions, and Foreclosures Part 4: Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No. Yes. Fill in the details. Court or agency Nature of the case Status of the case 10 Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11 Yes. Fill in the information below.

Case 17-25554 Doc 1 Filed 08/25/17 Entered 08/25/17 16:33:42 Desc Main Document Page 34 of 56

| epto   | or 1   | Lynne  |                       | Folias                      | Case Number (if kn                     | own)                     |   |  |  |  |  |  |  |
|--|--|--|-----------------------|-----------------------------|--|--------------------------|---|--|--|--|--|--|--|
|  |  | First Name   | Middle Name           | Last Name                   |  |                          |   |  |  |  |  |  |  |
| 11   | Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? |  |                       |                             |  |                          |   |  |  |  |  |  |  |
|  | No. Go to line 11  |  |                       |                             |  |                          |   |  |  |  |  |  |  |
|  | $\Box$   | Yes. Fill in the information be  | low.                  |                             |  |                          |   |  |  |  |  |  |  |
| 12   |  | Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? |                       |                             |  |                          |   |  |  |  |  |  |  |
|  | ■ N  |  |                       |                             |  |                          |   |  |  |  |  |  |  |
| P  | Part 5: List Certain Gifts and Contributions   |  |                       |                             |  |                          |   |  |  |  |  |  |  |
|  |  |  |                       |                             |  |                          |   |  |  |  |  |  |  |
|  |  | No.  |                       |                             |  |                          |   |  |  |  |  |  |  |
|  | Yes. Fill in the details for each gift.  |  |                       |                             |  |                          |   |  |  |  |  |  |  |
| 14   | With   | Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?  |                       |                             |  |                          |   |  |  |  |  |  |  |
|  | _  | ■ No.  ☐ Yes. Fill in the details for each gift.   |                       |                             |  |                          |   |  |  |  |  |  |  |
|  |  | List Certain Losses  |                       |                             |  |                          |   |  |  |  |  |  |  |
|  | art 6:   |  |                       | Class to the state of       |  |                          |   |  |  |  |  |  |  |
| 15   |  | Vithin 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or ambling?   |                       |                             |  |                          |   |  |  |  |  |  |  |
|  | _  | No.  |                       |                             |  |                          |   |  |  |  |  |  |  |
|  | □,   | Yes. Fill in the details for eacl  | h gift.               |                             |  |                          |   |  |  |  |  |  |  |
| P  | art 7:   | List Certain Payments or   | r Transfers           |                             |  |                          |   |  |  |  |  |  |  |
| Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?  Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. |  |  |                       |                             |  |                          |   |  |  |  |  |  |  |
|  | _  |  | cy petition preparers | s, or credit counseling age | incles for services required in your i | Jankruptcy.              |   |  |  |  |  |  |  |
|  |  | No.<br>Yes. Fill in the details  |                       |                             |  |                          |   |  |  |  |  |  |  |
|  |  | res. Fill III the details  |                       |                             |  |                          |   |  |  |  |  |  |  |
|  | F  | Party Contact Info   |                       | Description and value of    | any property transferred               | Date payment or transfer | Amount of payment                           |  |  |  |  |  |  |
|  |  | Geraci Law L.L.C.  |                       |                             |  |                          | Payment/Value:                              |  |  |  |  |  |  |
|  |  | 55 E. Monroe Street #3400  |                       |                             |  |                          | \$4,000.00: \$0.00<br>paid prior to filing, |  |  |  |  |  |  |
|  |  | Chicago,IL 60603   |                       |                             |  |                          | balance to be paid                          |  |  |  |  |  |  |
|  |  |  |                       |                             |  |                          | through the plan.                           |  |  |  |  |  |  |
|  |  |  |                       |                             |  |                          |   |  |  |  |  |  |  |
|  |  |  |                       |                             |  |                          |   |  |  |  |  |  |  |
|  | F  | Party Contact Info   |                       | Description and value of    | any property transferred               | Date payment or transfer | Amount of payment                           |  |  |  |  |  |  |
|  |  | Hananwill Credit Counseling  | g                     | Credit Counseling Service   | s                                      | 2017                     | \$25.00                                     |  |  |  |  |  |  |
|  |  | 115 N. Cross St.   |                       |                             |  |                          |   |  |  |  |  |  |  |
|  |  | Robinson, IL 62454   |                       |                             |  |                          |   |  |  |  |  |  |  |
|  |  |  |                       |                             |  |                          |   |  |  |  |  |  |  |
|  |  |  |                       |                             |  |                          |   |  |  |  |  |  |  |
|  |  |  |                       |                             |  |                          |   |  |  |  |  |  |  |
|  |  |  |                       |                             |  |                          |   |  |  |  |  |  |  |
|  |  |  |                       |                             |  |                          |   |  |  |  |  |  |  |
|  |  |  |                       |                             |  |                          |   |  |  |  |  |  |  |
|  |  |  |                       |                             |  |                          |   |  |  |  |  |  |  |

Case 17-25554 Doc 1 Filed 08/25/17 Entered 08/25/17 16:33:42 Desc Main Document Page 35 of 56

Lynne Fotias Case Number (if known) Debtor 1 First Name Middle Name Last Name Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No. Yes. Fill in the details. 18 Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Yes. Fill in the details for each gift. 19 Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details for each gift. Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account number Last balance before Type of account or Date account was instrument closed, sold, moved, closing or transfer or transferred 21 Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? ☐ No. Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? Papers ☐ No **BMO Harris** Yes 22 Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No. Yes. Fill in the details. Who else has or had access to it? Describe the contents Do you still have it? **Identify Property You Hold or Control for Someone Else** 23 Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No. Yes. Fill in the details. Where is the property? Describe the property Value

Case 17-25554 Doc 1 Filed 08/25/17 Entered 08/25/17 16:33:42 Desc Main

Debtor 1 Lynne Page 36 of 56

Case Number (if known) \_\_\_\_\_\_

Last Name

First Name

Middle Name

Case 17-25554 Doc 1 Filed 08/25/17 Entered 08/25/17 16:33:42 Desc Main Document Page 37 of 56

 Lynne
 Fotias
 Case Number (if known)

 First Name
 Middle Name
 Last Name

| olgii Below  |   |  |  |  |
|--|---|--|--|--|
| I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. §§ 152, 1341, 1519, and 3571. |   |  |  |  |
| ✗ /s/ Lynne Fotias   | ×   |  |  |  |
| Signature of Debtor 1  | Signature of Debtor 2   |  |  |  |
| Date 08/24/2017<br>MM / DD / YYYY  | Date  |  |  |  |
| Did you attach additional pages to Your Statement  | t of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? |  |  |  |
| No   |   |  |  |  |
| Yes  |   |  |  |  |
| Did you pay or agree to pay someone who is not a   | n attorney to help you fill out bankruptcy forms?                                 |  |  |  |
| No   |   |  |  |  |
| Yes. Name of person  | . Attach the Bankruptcy Petition Preparer's Notice,                               |  |  |  |
|  | Declaration, and Signature (Official Form 119).                                   |  |  |  |
|  |   |  |  |  |

Case 17-25554 Doc 1 Filed 08/25/17 Entered 08/25/17 16:33:42 Desc Main Document Page 38 of 56

B2030 (Form 2030) (12/15)

# United States Bankruptcy Court NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

| In  | re                         |  |  |  |   |   |
|-----|----------------------------|--|--|--|---|---|
| Lyı | nne Fotias                 | / Debtor                                     |  |  | Case No:  |   |
|     |                            |  |  |  | Chapter:  | Chapter 13  |
|     |                            | 1  | DISCLOSURE OF COM  | PENSATION OF A                               | ATTORNEY FOR DEE                                      | BTOR  |
|     | mpensation j               | o 11 U.S.C. § 329(a) a paid to me within one |  | , I certify that I am to petition in bankrup | the attorney for the above ptcy, or agreed to be paid | e named debtor(s) and that<br>d to me, for services |
|     | For legal                  | services, I have agreed                      | d to accept  | \$4,000.00                                   |   |   |
|     | Prior to tl                | ne filing of this stateme                    | ent I have received  | \$0.00                                       |   |   |
|     | Balance I                  | Due  |  | \$4,000.00                                   |   |   |
| 2.  | The sourc                  | e of the compensation                        | paid to me was:  |  |   |   |
|     | Deb                        | otor(s) Ot                                   | ther: (specify)  |  |   |   |
| 3.  | The sourc                  | e of compensation to b                       | pe paid to me is:  |  |   |   |
|     | De                         | btor(s) Ot                                   | ther: (specify)  |  |   |   |
| 4.  |                            | e not agreed to share the law firm.          | he above-disclosed compe                                   | nsation with any oth                         | ner person unless they ar                             | e members and associates                            |
|     |                            | y law firm. A copy of                        | above-disclosed compensa<br>the agreement, together w      |  |   |   |
| 5.  | In return f<br>case, inclu |  | I fee, I have agreed to rend                               | er legal service for a                       | all aspects of the bankrup                            | ptcy  |
|     |                            |  | nancial situation, and rende                               | ering advice to the de                       | ebtor in determining who                              | ether to file a petition in                         |
|     |                            | ruptcy;                                      |  |  |   |   |
|     | _                          | _  | y petition, schedules, state                               |  | -   |   |
|     | с. керг                    | esentation of the debto                      | or at the meeting of credito                               | is and commination                           | nearing, and any adjourn                              | ned hearings thereor,                               |
| 6.  | By agreen                  | nent with the debtor(s)                      | , the above-disclosed fee o                                | loes not include the                         | following service:                                    |   |
|     |                            |  |  |  |   |   |
|     |                            |  |  | ERTIFICATION                                 |   |   |
|     |                            |  | e foregoing is a complete s<br>representation of the debto |  | _   | or  |
|     |                            | Date: 08/24/2017                             | 7/   | s/ Ricardo Gomez                             |   |   |
|     |                            | Date   |  | Signature of Attorney                        | <i>y</i>  |   |
|     |                            |  |  | Geraci Law L.L.C.                            |   |   |

748167 Page 1 of 1 Record #

Name of law firm

## UNITED STATES BANKRUS FOR COURT NORTHERN DISTRICT OF ILLINOIS

## RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.



- Case 17-25554 Doc 1 Filed 08/25/17 Entered 08/25/17 16:33:42 Desc Main 3. Personally review with the debtor **Encelopethic** configuration, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO

1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.



CARA Page 2 of 6

- Case 17-25554 Doc 1 Filed 08/25/17 Entered 08/25/17 16:33:42 Desc Mair 2. Inform the debtor that the debtor receivement that the debtor receivement that the debtor receivement that the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307 (a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

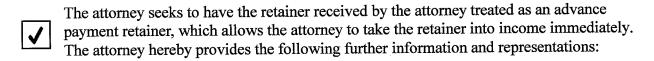


# Case 17-25554 Doc 1 Filed 08/25/17 Entered 08/25/17 16:33:42 Desc Main C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.



- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows: purpose: provide some money for attorney without waiting 6 months. Advantage to debtor: costs client less by reducing administrative expense and encouraging efficiency rather than charging by hour and submitting bills.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;



- Case 17-25554 Doc 1 Filed 08/25/17 Entered 08/25/17 16:33:42 Desc Mair (d) Any portion of the retainer that is understrued to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

#### E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank]



#### Case 17-25554 Doc 1 Filed 08/25/17 Entered 08/25/17 16:33:42 Desc Main F. ALLOWANCE AND PAYMENT OF ATT TORNIES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$ 4.000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$310.00

| 3. Before signing this agreement, the attorney h  | as received ,\$ | 0          |     |                |
|---|-----------------|------------|-----|----------------|
| toward the flat fee, leaving a balance due of \$_ | 4000            | ; and \$ _ | 310 | _for expenses, |
| leaving a balance due for the filing fee of \$ 0  |                 |            |     |                |

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

|       | $\overline{}$ |    | 15/ 000        |
|-------|---------------|----|----------------|
| Date: | - /           | /  | 10 2011        |
| Daw.  |               | /_ | / <del>/</del> |

Signed:

Debtor(s)

Co-Debtor(s)

Attorney for the Debtor(s)

Do not sign this agreement if the amounts are blank.

Case 17-25554 Doc 1 File **Gesazy Law Ent-G**ed 08/25/17 16:33:42 Desc Main National Headquarters: 55 E. Monroe Biget #3460 Phicago Hope 1866925 01866925-1313 help@geracilaw.com Case 17-25554

Date: 7/18/2017

Consultation Attorney: ADD

Record #: 748-167

**Attorney - Client Agreement** 

The undersigned hires Geraci Law L.L.C. and its associated attorneys for representation in a Chapter 13 bankruptcy under the following terms and conditions. I have signed and received a copy the "Court Approved Retention Agreement" (CARA) between Chapter 13 Debtors and their Attorneys" as established by the Bankruptcy Court for the Northern District of Illinois, and any terms that conflict with it are null and void. I understand I must comply with those terms. Attorney fees for filed Chapter 13 Bankruptcy shall be the fee stated in the CARA I have received the 11U.S.C § 527(a) disclosures. I have been advised of my chapter 7 alternative and choose to file Chapter 13 instead even though it usually costs more. More than one attorney and paralegal will work on my case.

FEES: This does NOT INCLUDE court filing fees of \$310, costs for credit counseling or financial management classes. Any amount not paid

| prior to the case being filed shall be paid through the Chapter 13 Trustee. These fees are fixed, but the attorneys may apply to the court for additional fees if allowed by the CARA or other circumstances, such as extended evidentiary hearings, contested adversary proceedings or appeals. If the Court awards additional fees, they will also be paid through the Chapter 13 Trustee. Fees are "flat fees" and "advance payment retainers" for pre-filing and pre-confirmation work, become property of this firm on payment, and are deposited into the firm's operating account. Payments are applied to the "flat fee". If this contract is terminated by either party prior to the filing of the case, we will submit any dispute to binding arbitration within 30 days. If I close my file or breach this contract I agree to pay for the work done to that time. I assign to my attorney all amounts tendered as filing fees or court costs and authorize my attorney to transfer said funds from his trust account to his operating account in payment of all outstanding fees owed by me if case is not filed. |
|---|
| No other work: Geraci Law is not representing me in state or other courts regarding creditors in my bankruptcy. Any state court action not stopped by the Automatic Stay of a filed bankrutpcy is my responsibility.  |
| Injury or other claims or property I must disclose any such claims or property I now have or acquire after filing Chapter 13 to both the Chapter 13 trustee and to the court in a filed amendment and obtain authority to keep them or pay those claims to the Trustee.   |
| PLAN: The plan payment is estimated to be \$ per month for months. The payment and length of the plan are based on the information I have provided, including income, expenses, assets and debts. If these amounts are not accurate, my plan payment or duration may need to be increased. In addition, the Court, Chapter 13 Trustee or creditors could object to my proposed Chapter 13 payment, which may cause it to increase. I further understand that if my income or expenses change during my Chapter 13, my plan payment may have to change. I agree to read my petition and plan and study it before signing it so I know what is included, INCLUDING what I am listing as debts, what my property is, what my assets are and if they are claimed as exempt, and to make full disclosure.  |
| My plan payment DOES include the following, unless stated otherwise: mortgage arrears; association arrears; vehicles; tax debt; support obligations that are post due (but not future) parking tickets (not traffic fines); debts pursuant to a divorce decree/marital settlement you listed; other secured debts including furniture, electronics, etc.; all other unsecured debts; other:   |
| My plan payment does NOT include include future mortgage, rent, condo fees and support payments; criminal lines court fees, rentrease arrears; student loan principal and interest unless 100% planned to unsecured creditors, sold property taxes; debts incurred after the case is  |
| filed, including any association fees as long as the property is in my name; other  |
| Debte not discharged if they not paid in full student loans; educational debts; unfiled or late filed tax debts; undisclosed debts,   |
| support/maintenance debts; debts incurred by fraud, or debts listed in your red folder or found non-dischargeable by a studge.  Representation limited to Bankruptcy Court We do not represent you in state court, or in loan modifications or similar matters.  If I am eligible to receive a tax refund during my Chapter 13, I understand I must turn it over to the Chapter 13 Trustee unless I am specifically advised that I do not need to. This may change on a yearly basis, so I must check with my attorneys every year. I also understand that if I receive any significant sums of money other than through employment, including but not limited to life insurance proceeds, workers compensation award, personal injury or other court settlement, I MUST notify my attorney immediately and I may have to pay some or all of the funds into my Chapter 13 plan.   |
| I cannot transfer any property or incur any credit or debt without the express permission of my attorney or the Court and I must make full disclosure of all income, expenses, debts and assets in my initial consultation and on my bankruptcy petition. If I fail to remain current in a domestic support obligation, fail to certify to the Court that I have remained current, or if I fail to take my financial management class, that my case may be closed without a discharge, and I will be required to pay a fee to have it reopened.   |
| x x   |
| Lynne Editas (Debtor) (Joint Debtor)  |
|   |

Representing Geraci Law L.L.C.

Dated: \_\_\_\_\_\_\_\_/~/

Attorney for the Debtor(s)

Case 17-25554 Doc 1 Filed 08/25/17 Entered 08/25/17 16:33:42 Desc Main Document Page 46 of 56

## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

Lynne Fotias / Debtor

Bankruptcy Docket #:

Judge:

#### **VERIFICATION OF CREDITOR MATRIX**

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: 08/24/2017 /s/ Lynne Fotias

Lynne Fotias

X Date & Sign

Record # 748167 B 1D (Official Form 1, Exh.D)(12/08) Page 1 of 1

<sup>\*</sup> Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

Entered 08/25/17 16:33:42 Page 47 of 56

Desc Main

B 201A (Form 201A) (11/11)

### UNITED STATES BANKRUPTCY COURT

#### NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a joint case (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days **before** the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are

B 201A (Form 201A) (11/11) 748167 Page 1 of 2 Record #

Case 17-25554 Doc 1 Filed 08/25/17 Entered 08/25/17 16:33:42 Desc Main Document Fotias / Debtor

Form B 201A, Notice to Consumer Debtor(s)

In re Lynne

Page 48 of 56

Page 2

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

#### Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

| Dated: 08/24/2017  | /s/ Lynne Fotias        |  |
|--------------------|-------------------------|--|
|                    | Lynne Fotias            |  |
| Data di 09/24/2017 | /c/ Picardo Comoz       |  |
| Dated: 08/24/2017  | /s/ Ricardo Gomez       |  |
|                    | Attorney: Ricardo Gomez |  |

Form B 201A. Notice to Consumer Debtor(s) Record # 748167 Page 2 of 2

## Case 17-25554 Doc 1 Filed 08/25/17 Entered 08/25/17 16:33:42 Desc Main Document Page 49 of 56

| tor 1  | Lynne   | Fotias   | Case Number (# #   | (IIOWI)   |
|--|---|--|--|---|
|  | First Name  | Middle Name Last Name  |  |   |
|  |   |  |  |   |
| Part 6   | Answer These Questions  |  |  |   |
| 3. W   | /hat kind of debts do<br>ou have?   | 16a. Are your debts primarily cas "incurred by an individual property of the second of | onsumer debts? Consumer debts are definantly for a personal, family, or household possiness debts? Business debts are debts then to refer through the operation of the business debts are debts that are not consumer debts or business described.   | s that you incurred to obtain   |
|  | Are you filing under<br>Chapter 7?  | No. I am not filing under Cha  |  | property is excluded and  |
| ;<br>;<br>;  | Do you estimate that after<br>any exempt property is<br>excluded and<br>administrative expenses<br>are paid that funds will be<br>available for distribution<br>to unsecured creditors? | ☐ Yes. I am filing under Chapte administrative expenses ☐ No. ☐ Yes.   | r 7. Do you estimate that after any exempt p<br>s are paid that funds will be available to distri  | pute to unsecured creditors:  |
|  | How many creditors do<br>you estimate that you<br>owe?  | ■ 1-49<br>□ 50-99<br>□ 100-199<br>□ 200-999  | ☐ 1,000-5,000<br>☐ 5,001-10,000<br>☐ 10,001-25,000   | ☐ 25,001-50,000<br>☐ 50,001-100,000<br>☐ More than 100,000  |
|  | How much do you<br>estimate your assets to<br>be worth?   | \$0-\$50,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000<br>\$500,001-\$1 million   | ☐ \$1,000,001-\$10 million ☐ \$10,000,001-\$50 million ☐ \$50,000,001-\$100 million ☐ \$100,000,001-\$500 million  | ☐\$500,000,001-\$1 billion ☐\$1,000,000,001-\$10 billion ☐\$10,000,000,001-\$50 billion ☐More than \$50 billion     |
|  | How much do you<br>estimate your liabilities<br>to be?  | \$0-\$50,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000<br>\$500,001-\$1 million   | ☐ \$1,000,001-\$10 million ☐ \$10,000,001-\$50 million ☐ \$50,000,001-\$100 million ☐ \$100,000,001-\$500 million  | ☐ \$500,000,001-\$1 billion ☐ \$1,000,000,001-\$10 billion ☐ \$10,000,000,001-\$50 billion ☐ More than \$50 billion |
| Par  | t 7: Sign Below   |  |  |   |
| For  | you   | correct.   | I declare under penalty of perjury that the integrated of the integral of the second o | ible, under Chapter 7, 11,12, or 13   |
| woodooodayaacaaadaya   |   | this document, I have obtained ar  | I did not pay or agree to pay someone who is not read the notice required by 11 U.S.C. § 34  | 42(D).  |
| минительной меренераменто портинательной меренераментом портинательной меренераментом портинательной меренерам |   | idomtand making a false state  | the chapter of title 11, United States Code, ment, concealing property, or obtaining mon tin fines up to \$250,000, or imprisonment for d 3571.  | ney or property by fraud in connection  |
| ***************************************  |   | Signature of Debtor 1  | Sig  | nature of Debtor 2  |
| www.igrategrapeaeeeeee   |   | Executed on  | //2017 Ex  | mecuted on  |

## Case 17-25554 Doc 1 Filed 08/25/17 Entered 08/25/17 16:33:42 Desc Main Document Page 50 of 56

|  | Lynne   |  | Fotias                               | Case Number (if known) _ |                           |
|--|---|--|--------------------------------------|--------------------------|---------------------------|
| Debtor 1   | First Name  | Middle Name  | Last Name                            |                          |                           |
| represe<br>if you a<br>by an a   | or attorney, if you are ented by one are not represented attorney, you do not o file this page. | proceed under Chapteach chapter for which the information in the Signature of At Ricardo Printed name  Geraci L Firm name  55 E. M | ter 7, 11, 12, or 13 of title 11, Ur | Date Date                | s) the notice required by |
|  |   | Chicago  | )                                    | IL 606<br>State 2        | 603<br>IP Code            |
| NAMES OF THE PROPERTY OF THE P |   | Contact Phon   | e 312-332-1800                       | Email address            | ndil@geracilaw.com        |
| excentional descriptions of the second secon |   | 632254<br>Bar number   | 13                                   | IL<br>State              |                           |

Case 17-25554 Doc 1 Filed 08/25/17 Entered 08/25/17 16:33:42 Desc Main Document Page 51 of 56

| Fill in this in                 | formation to identify      | your case:                 |                               |             |
|---------------------------------|----------------------------|----------------------------|-------------------------------|-------------|
| Debtor 1                        | Lynne                      |                            | Fotias                        | <del></del> |
| 0.40                            | First Name                 | Middle Name                | Last Name                     |             |
| Debtor 2<br>(Spouse, if filing) | First Name                 | Middle Name                | Last Name                     |             |
| United States                   | s Bankruptcy Court for the | : <u>NORTHERN</u> District | of <u>ILLINOIS</u><br>(State) |             |
| Case Numbe<br>(If known)        | er                         |                            |                               |             |

### Official Form 106 Dec

## **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filling together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

|  | Sign Below  |
|--|---|
| ***************************************  | Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?                                     |
|  | No  |
| Andreas Section (Section)  | Yes. Name of Person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).                     |
|  |   |
| -  |   |
| waters and the second s | Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and |
| -  | correct.  |
| ***************************************  | Signature of Debtor 1 Signature of Debtor 2   |
| ATT AND THE PROPERTY OF THE PR | Date  |
| -  |   |

## Case 17-25554 Doc 1 Filed 08/25/17 Entered 08/25/17 16:33:42 Desc Main Document Page 52 of 56

| ynne |             | Fotias        | Case Number (if known) |
|------|-------------|---------------|------------------------|
|      | Middle Name | Last Name     |                        |
| -    |             | 46' 1 M . No. | TITLE Last Name        |

| Part 12:                         | Sign Below   |  |  |  |  |  |
|----------------------------------|--|--|--|--|--|--|
| I have re<br>answers<br>in conne | I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. §§ 152, 1341, 1519, and 3571. |  |  |  |  |  |
| X                                | Signature of Debtor 2  |  |  |  |  |  |
| Da                               | MM / DD / YYYY  Date   |  |  |  |  |  |
| Did you                          | attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  |  |  |  |  |  |
| No                               |  |  |  |  |  |  |
| Yes                              |  |  |  |  |  |  |
| Did you                          | ı pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?  |  |  |  |  |  |
| No Yes                           | s. Name of person Attach the Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119).   |  |  |  |  |  |

#### Case 17-25554 Doc 1 Filed 08/25/17 Entered 08/25/17 16:33:42 Desc Main

## DISCLAIMER OBERTOTS have read afrefagree:

- Divorce or family support debts to a spouse, ex-spouse, child, guardian ad litem or similar person or entity in connection with a separation agreement, divorce decree or court order are not dischargable. Priority support debts must be paid in full in your Chapter 13 or it cannot be confirmed. DEBTS YOU AGREED TO ASSUME IN MARITAL SETTLEMENT AGREEMENTS are NON-DISCHARGEABLE if your ex-spouse files an adversary complaint, and the Judge rules that (a) you do not have the ability to pay the debt OR (b) discharging such debt would result in a benefit to you that outweighs the detriment to ex-spouse or your child. You agree to get advice in writing from your divorce attorney and send to us with copy of agreement. You must list any ex-spouse or spouse as a creditor. No guarantee any divorce debt is dischargeable. Property you are still on title to, or have a right to in a divorce, may be taken by a Bankruptcy trustee in a Chapter 7 and sold, or may be disposable income in a 13.
- Student loans and educational benefits are not discharged in Chapter 7 or 13 if government insured loan or owed to non-profit school unless you pay us to file a complaint within the bankruptcy to prove repayment would be an "undue hardship", and win. Interest on student loans continue to run while you are in a Chapter 13.
- Cosigners, joint applicants, debts of persons other than debtor, debts incurred during marriage in community property states, or for family support are not discharged and joint, community or co-signers are not protected from collection unless you pay 100% of the debt. Creditors can collect from co-signors and put your bankruptcy on their credit report, and report them negatively to credit bureaus. You may prevent this by making the regular payments to the creditor. Creditors can liquidate collateral of your co-signer and refuse to continue payment in installments. Property you are joint on with other persons can be LIQUIDATED to pay your creditors.
- TAX DEBTS. Most taxes are not discharged in bankruptcy. However, income tax debt (1040 type tax) can be discharged if the following four rules are met: (1). The tax return was DUE at least 3 YEARS (plus extensions) before the filing of your bankruptcy case. (2). You FILED your income tax return at least 2 YEARS before your bankruptcy was filed. (You did not file a return if the tax authority or IRS had to file one for you, or if you didn't send the return to the District Director) (3). You did not wilfully intend to evade the tax. (4). The tax must have been ASSESSED over 240 DAYS before the bankruptcy filing. We recommend you meet with the IRS or state department of revenue to make sure all the conditions have been met, before you hire us or file a bankruptcy. Fraudulent taxes and taxes on unfiled returns can be discharged in a Chapter 13 case. Time in an offers in compromise, & time in bankruptcy plus 6 months, will extend the above time periods. Employers' share of FICA & FUTA is dischargeable, but not trust fund taxes like the employee's funds or sales tax.
- 5. Fines, traffic tickets, parking tickets, penalties to governmental unit are not discharged in Chapter 7, may not be discharged in 13 without full payment.
- 6. Non filing spouse: If you file individually, your spouse is not our client. Only your debts are discharged. If you want to protect a non-filing spouse, pay their bills or file a joint case with them. Family expenses (medical bills, rent and necessities may be collected from a non-filing spouse). Wisconsin, community property is liable for community debts. 7. DUI PERSONAL INJURIES, DEBTS YOU DON'T LIST are not discharged.
- 8. DEBTS where creditors successfully object to discharge may survive Creditors, the Trustee, or Court, can try to deny discharge based on many factors,
- a. Income sufficient to pay a percentage of your unsecured debt. b. Failure to keep books and records documenting your financial affairs. c. Luxury purchases or cash advances within 60 days of filing or without intent or ability to repay. d. Debts you made by false pretenses, breach of fiduciary duty, wilful and malicious injuries to others e. Benefit overpayments like aid or unemployment if a determination of fraud has been made before or during bankruptcy. f. Failure to appear at meetings, court dates, or co-operate with the Trustee.
- 9. INTEREST ON NON-DISCHARGEABLE DEBTS in a Chapter 13 continues to accrue, and CREDITORS WHO DO NOT FILE CLAIMS in your Chapter 13 plan within 90 days (180 days for governmental units) of the meeting of creditors, do not get paid. Your plan and their claim should provide for interest at contract rate, or you will have to pay the debt outside the Chapter 13 plan. Property taxes must be paid by you directly to avoid sale for delinquent taxes.
- 10. LIQUIDATION OF REAL AND PERSONAL PROPERTY. If you file a Chapter 7, any property that is not listed and claimed exempt on Schedule C pursuant to state or federal law is taken and sold by the trustee to pay creditors. You agree to assume the risk that your property will be taken and sold by the bankruptcy trustee (at or less than what it is worth) if we can't protect it under applicable state law. You get a discharge, but the trustee can take property not listed and exempted on schedules B and C and sell it for whatever price will provide some benefit to creditors.
- 11. CHANGE IN LAWS. Laws & court cases change constantly. We can file your case today if you pay us in full (some attorneys give credit, we don't) pay the filing fee and sign your petition in our main office. ANY DELAY either in hiring us, or after, IS YOUR REPSONSIBILITY. ADVERSE RULINGS Judges that sit in adjoining courtrooms can rule differently on the same facts. We can predict but can't guarantee a judge will or will not rule against you. You accept the risk of a judge ruling against you, as in any lawsuit.
- 12. PAYMENTS TO CREDITORS YOU PREFERRED to pay more than \$600 in front of others, within 1 yr if a relative or insider, or within 90 days if another creditor, so don't pay off debts to keep credit cards or protect others. TRANSFERS OF PROPERTY within 4 years that made you unable to pay your debts at the time can be reversed by a Trustee and the transferee will have to give back the property you transferred.
- 13. SURRENDER OF PROPERTY Bankruptcy gets rid of debts, but real estate, condos and time shares remain in your name until a foreclosure sale or the lender accepts a deed in lieu of foreclosure. Turn condo keys over to condo association or remain liable for assessments after filing, and make sure you keep buildings & land insured and maintained and secured until it is taken back by lender or out of your name. If you let a house go vacant and pipes explode or someone gets killed in there you may be liable.
- 14. RIGHT TO RECEIVE inheritances, tax refunds, injury claims, compensation of any kind, insurance or realty commissions, are property of the bankruptcy estate and you will surrender these to the trustee unless they are claimed exempt on Schedule C, and no objection to your claim of exemption is upheld. Do not deduct extra money from taxes so you are entitled to a refund, change your W-9 if necessary.
- 15. JOINT ACCOUNT HOLDERS holders entire amount in the account could be taken by the trustee under Chapter 7.
- 16. MARRIED COUPLES GOING THROUGH DIVORCE: We have been advised to seek independent counsel for our bankruptcy. We understand that Peter Francis Geraci does not represent us with regard to any divorce matters and does not make any representations regarding what will happen in divorce court. We have decided to file a bankruptcy together dispite the fact that we are getting a divorce and our interests could be adverse. We have agreed to cooperate with each other in this joint bankruptcy.
- 17. AUTO LEASES & INSTALLMENT AGREEMENTS to purchase things, leases and almost all contracts will be void after bankruptcy. They are "executory contracts", and if they are of no benefit to the bankruptcy estate and not assumed within 60 days of filing, they are void. Debtors have been warned of this, and unless there is a novation under state law, or agreement not to use bankrptcy to void the contract, the debtors rights under the contract are extinguished. Debtor agrees to be responsible for obtaining such agreements or losing rights under such contracts. Debtor agrees that his or her attorney will not file motions to assume such contracts.
- 18. Setoffs if you have money in a credit union or creditor account, or other loans that cross-collateralized, any money or property may be taken for both loans. The Undersigned have read the above & assume the risk that a debt is not discharged in bankruptcy, that our non-exempt property will be taken and sold by the bankruptcy trustee if it can't be protected, that the trustee might object if I/we have excess income, or change in State, Federal or Bankruptcy laws before the case is filed in Court, AND WE HAVE TO READ, CHECK, & MAKE SURE OUR PETITION IS ACCURATE!!!!

Dated

Lynne Fotias

X Date & Sign

Case 17-25554 Doc 1 Filed 08/25/17 Entered 08/25/17 16:33:42 Desc Main Document Page 54 of 56

# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

Lynne Fotias / Debtor

Bankruptcy Docket #:

Judge:

### VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

LDECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT

Dated: 12017

Lynne Fotias

X Date & Sign

Case 17-25554 Doc 1 Filed 08/25/17 Entered 08/25/17 16:33:42 Desc Main Document Page 55 of 56

Part 4:

Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

Lynne Fotias

Date: // /2017

If you checked line 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Form B 201A, Notice to Consumer Debtor(s)

In re Lynne Fotias / Debtor

Page 2

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

## <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

### Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

Dated: 1/2017

Lvnne Fotias

X Date & Sign

Dated: 8, 24, 12017

Attorney: Ricardo Gomez